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INFLUENCES WHICH QUICKEN OR STIMULATE

LIKE the unseen power which radiates from an electric dynamo, the inspiration of a great life fires the hearts of men and women. Those who have achieved great things in life acquire a dignity and an influence which is reflected in everything they say and do; they radiate a divine energy which kindles the hearts and minds of all who come in contact with their lives. These qualities of leadership cannot be assumed or counterfeited, but they must be the natural expression of inward worth.

I know a great scientist and as he speaks one can almost feel waves of energy radiating from him and one realizes that back of it all is some hidden power, a great gift with which few are endowed. Such an influence surcharged the life of Michael Pupin, the simple Serbian peasant who rose to the noblest heights of modern science. From his mother he drew the spiritual power which urged him on to the realization of the best that was in him.

Every happy and useful life had back of it some dominating influence and as I sit at my work and look into the faces of the women whose portraits hang over my desk, I am conscious that from their lives has radiated to mine some such influence. It might well be called

"Inspiration Corner," where my desk and the photographs are, for inspiration means the influence which quickens or stimulates and each one has in some definite way stimulated me and made me aspire to be a more helpful nurse.

From them I have learned lessons of great value. Many years ago, one taught me that the younger generation of nurses must in time assume the burdens and responsibilities which pioneer nurses were then carrying and my sense of individual responsibility was developed. Through this influence, I held my interest in nursing though no longer actively engaged in it, and I learned as the years went on how I could help in raising standards and that my small bit was important because it was a part of a great scheme to put our profession on a higher plane. Through the vision of others, I have been inspired to a broader outlook for the future of nursing and I have known the privilege of helping in a great cause.

As I review the work of these women and of others and recall all that they have contributed to the upbuilding of our profession, I am stimulated to be loyal, steadfast and unswerving in my devotion to the ideals for which they have striven.

THE SIGNIFICANCE OF BLOOD CHEMISTRY

By J. LISLE WILLIAMS, M.D.

THE chemistry of the blood is a subject which has been studied much during the last dozen years. Previous to this time our knowledge of the chemical content of this most complex fluid was very limited. It has long been recognized as a fruitful field for research but because of technical difficulties involved in the separation and quantitative estimation of the many constituent compounds in this "circulating tissue" of the body little progress was made until the last decade.

Since the cell theory of life was established it has been known that different organs of the body are composed of certain characteristic cells. The cells of different organs are not only characteristic as to form but also as to chemical composition. As a result of careful painstaking analyses some of the chemical substances peculiar to various tissues and organs have been isolated and identified. The difficulties of tissue analysis are many because of the heterogeneous character of the compounds to be analyzed. A full comprehension of the difficulties associated with blood analysis can be obtained by remembering that the blood is the fluid that bathes the cells of all the many tissues and organs of the body. In this fluid are carried all the food for each particular cell and all the waste products resulting from the metabolism of that cell. This life-giving stream of liquid nourishment is then a very complex tissue. Without its supply the cells of the body die and if these cells are necessary for the life of the organism, the body itself dies. If the liquid carries

poisons to the cells they likewise die. Thus the importance of the blood to the complete co-ordination of the various organs can scarcely be overestimated.

Our knowledge of the chemistry and composition of the blood in recent years has been vastly increased by the epoch making researches of such chemists as Folin, Van Slyke, Benedict, Bloor and others. Folin especially has made possible great strides in research through his ingenious methods for the accurate quantitative determination of the various non-protein constituents of the blood. By using these delicate methods we are able to measure accurately the amount of certain nitrogenous waste products in the blood stream. Formerly the chemistry of the urine was studied quite carefully for the amount of these various waste metabolites, but now we know the amount in the blood is of far greater significance.

Urea is one of the substances produced by the breaking down of proteins or from the digestion of meat foods. Its increase in the blood is indicative of a lessened function of the kidneys. In uremic coma the amount of urea nitrogen in the blood may reach 300 mg. per 100cc., an amount twenty times the normal. Sometimes the estimation of this compound in the blood may be of immense aid in the diagnosis of an obscure case. Repeated daily or weekly, determination may express in mathematical terms the progress or decline of the patient's health. Likewise the estimation of creatinine in the blood may give a fairly accurate means of making the prognosis in chronic interstitial

nephritis where clinical means fail. Also the quantitative analysis of the blood for the amount of uric acid may help to establish the diagnosis of gout in an otherwise obscure case. Repeated observations will often aid materially in ascertaining the effect of medication upon the condition. Uric acid retention in the blood may result from lessened kidney function and therefore an early nephritis may be detected by quantitative determination of this substance. Likewise in the toxemias of pregnancy and eclampsia the concentration of uric acid in the blood is markedly increased. This fact was demonstrated by the author in 1921.¹

Here as in nephritis the estimation of uric acid content is of value in prognosis as well as in diagnosis.

The amount of non-protein nitrogen in the blood roughly parallels the amount of urea nitrogen which normally constitutes about 50 per cent. of the total. When the urea nitrogen is markedly increased the non-protein nitrogen must necessarily be increased. In addition to the above mentioned compounds,—urea, uric acid and creatinine, the non-protein nitrogen contains amino-acids, ammonia and compounds of undetermined residual nitrogen. The amino-acid nitrogen of the blood is increased in acute yellow atrophy of the liver and following a heavy meal. The clinical significance of the undetermined rest nitrogen is as yet unsolved but offers a fruitful field for research.

In diabetes, obesity and pre-diabetic conditions the percentage of sugar in the blood is of immense value in diagnosis, prognosis and treatment. Renal

diabetes may thus be distinguished from true or pancreatic diabetes. With the advent of insulin, blood chemistry methods and analyses have made possible a more complete understanding of the action and use of this powerful hormone. Now we know that "insulin reactions" are caused by hypoglycemia or a lessened sugar content of the blood and that they are cured by supplying more sugar for the blood to carry to the tissues.

Another chemical test of practical value in diabetes is the carbon dioxide combining power of the plasma. This indicates the so-called alkali reserve of the patient. When acidosis develops and this reserve is depleted the danger of coma becomes imminent. The determination of the CO_2 combining power thus warns of an impending danger which may be averted by proper measures. In other conditions of acidosis this test is likewise of great value.

Normally the reaction of the blood is maintained within very narrow limits. The actual hydrogen ion concentration of the blood can be measured very accurately. This test is of little clinical value except in cases of very severe or uncompensated acidosis where a definite change occurs. From the standpoint of clinical importance the estimation of the bicarbonate reserve of the plasma is of much greater practical value than is the determination of the actual hydrogen ion concentration.

The fatty or lipid substances of the blood can be measured also with a degree of accuracy compatible with clinical use. These substances include not only fat, but also fatty acids, lecithin and cholesterol. In diabetes all

¹ Williams, J. L.: *Jour. Am. Med. Ass'n.*, 1921, LXXVI, 1297.

these substances are increased, in some cases very markedly so that the condition is called a hyperlipemia. The other diseases associated with an increase in lipid substances in the blood stream are nephritis, arteriosclerosis, obstructive jaundice and certain cases of cholelithiasis. In chronic parenchymatous nephritis (nephrosis), there is a marked increase in the cholesterol content of the blood and this is believed to be of fundamental importance in the diagnosis and treatment of this disease. In the early stages of certain malignant tumors and in pregnancy the blood cholesterol is also increased.

The inorganic constituents of the blood have also been studied with considerable thoroughness. The chloride content of the blood plasma measured as sodium chloride is found to be increased in edema due to nephritis or heart disease. This is due to salt retention and there is a lessened excretion in the urine. The blood chlorides are lower than normal in pneumonia and diabetes.

In tetany following parathyroidectomy and in infantile tetany the amount of calcium in the blood is markedly decreased. Also in the terminal stages of Bright's disease there is a marked diminution in the blood calcium. In this disease also there may be a marked increase in the inorganic phosphates of the blood especially in patients with uremia having a high degree of nitrogen retention. There may be some relation between the amount of inorganic phosphorus and the acidosis of chronic nephritis.

There is a marked lessening of the inorganic phosphates of the blood serum in rickets.

The above constitute the chief chemical compounds which are found to have an abnormal variation in various diseases. These diseases in which chemical examination of the blood has been proved to be of clinical value are nephritis, diabetes, eclampsia, pernicious vomiting of pregnancy, gout, obesity, tetany, rickets, pneumonia and in all conditions associated with acidosis. Further research will undoubtedly enlarge and amplify this list. Young as is the science of blood chemistry, our knowledge concerning this most important field is vast. What we now know is small as compared with what we may learn in the future. Not only may we learn many new facts, but what is more important we may find the explanation for present facts especially in the diseases of metabolism such as diabetes, nephritis and hyperthyroidism. Thus to attempt to describe the significance of blood chemistry is like the charting of an unknown ocean depth, i.e., broad and deep; yet in spite of our lack of knowledge about this subject it is so important as to become a necessary part of the laboratory work of every well equipped hospital.

Nurses, like physicians, should be interested in the advancement of medical science and should thus be informed concerning the value and importance of these tests. Formerly a request for "blood examination" meant a count of the red or white corpuscles and an estimation of the percentage of hemoglobin. Now we should understand that the term is obsolete because "examination" may mean any of the various tests described above.

The patient is the most important

single individual to be considered in our work. Because of her close association with the patient, the nurse often has a great opportunity to aid the physician by intelligent suggestions to the patient.

The nurse should understand something of the significance of the tests requested by the physician in order that the proper service may be rendered to the patient.

POISON WORK IN THE DENVER GENERAL HOSPITAL¹

BY LOUIE CROFT BOYD, A.B., R.N.

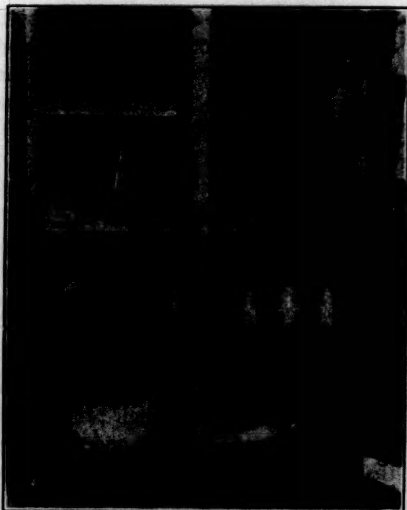
WHEN it lives right, human nature is magnificent and its possibilities are beyond the ken of our present understanding. When it lives wrong, it proves to be a curse the end of which is unfathomable degradation and sorrow. Though not all poison cases are suicidal in their intent, the truth of what I have just written claims one's attention with tremendous force when helping in the struggle of saving a life from the effects of poison.

The poison work at the Denver General Hospital (formerly the City and County Hospital), Denver, Colorado, has always provided valuable experience in that phase of emergencies. Prior to 1900, the service averaged a small number of cases each month, probably between two and three, but it was possible then for a majority of the students to be released from their wards for observation work while a case was being treated. Since that time this work has steadily grown in importance and so, for many years, each student has had her definite time of service in this department.

The drugs employed have always been varied, though previous to the going into effect of the morphine act that one appeared to be the favorite whereas now, owing to the illicit brewing and selling of alcoholic drinks, alcohol takes first place. It is interesting to note that the power of suggestion is as evident in the selection of poisons used as in fashions, for cases due to one kind of poison will follow one another in a series, sometimes in close succession.

All poison cases are now treated in the general emergency room of the institution, because its size permits the care of more than one person and its accessibility has a life-saving advantage for the patient. A regular emergency bed was formerly used, but this has been replaced by an emergency table with a pad and pillow covered with rubber sheeting, sewed on. The pad is then covered by a sheet put on tight but not pinned on and the pillow is placed in a muslin case. Across the table are straps for securing the upper and lower extremities while treatment is being given to the patient. Two large tanks of oxygen are kept in the room always. Illuminating gas poison cases, for instance, make a heavy drain upon an

¹ The author is indebted to the following for assistance: To Mrs. Margaret Bryce Slaughter, Senior Class, for pictures; to Miss Edith Hodges, Senior Class, for lists of paraphernalia; to Dr. B. B. Jaffa, for recent statistics.



POISON CUPBOARD, DENVER GENERAL HOSPITAL

oxygen tank. A proctoclysis stand and its equipment are also at hand when needed.

When not in use, the Poison Cupboard is kept locked; the Supervisor of the Forty-eight-hour Surgical Ward and her assistants being responsible for the key. On the insides of the cupboard doors are typewritten directions in regard to the proper antidote to poisons, their preparation for use, and their method of administration to the patient; a complete list of what should always be in the cupboard; and general rules governing the conduct of this work. General working supplies include the following articles:

- 5 granite pitchers
- 1 granite basin
- 1 large granite basin for stomach tube
- 2 large emesis basins
- 1 enema can and tube
- 1 proctoclysis can and tube
- 1 ice cap
- 1 water bottle

- 1 box of tongue depressors
- 1 box of applicators
- Glass drinking tubes
- 2 graduates—4 and 16 ounces.

On a small tray are found tissue and tongue forceps, tourniquet, two hemostats, and a knife. Miscellaneous supplies include two Mayo gags, an ether mask, paper mouth wipes, a thermometer, and a box of adhesive plaster. Sterile appliances comprise applicators, catheters, cotton pledgets, rubber gloves, towels and suture materials. Completely equipped hypodermic and hypodermoclysis trays are in readiness for instant use. One quart of saline solution in a flask is kept at the proper temperature by a simple device originated by Miss Bramkamp, former superintendent of nurses. A wooden box, with a cover on hinges, is lined with heavy asbestos and has an electric connection with two bulbs on the inside of the box,—one always being turned on. Another simple contrivance is a pasteboard box, about two inches high by ten inches long, covered with adhesive plaster in which openings have been made to hold different sized bottles, mainly for hypodermic use. The drugs for hypodermic use always kept in the Poison Cupboard are adrenalin chloride, apomorphine hydrochloride, atropine sulphate, caffeine and sodium benzoate, digitalin, digalen (liquid form), nitroglycerine, pilocarpine hydrochloride, and strychnine sulphate, also ampules of amyl nitrite, camphor in oil, pituitary extract, and sodium cacodylate.

The miscellaneous supply of drugs and other necessities is as follows:

- Acetic acid
- Citric acid
- Tannic acid
- Adrenalin chloride solution



EMERGENCY TABLE WITH STRAPS IN PLACE

Alcohol—15 per cent. and 95 per cent.
Ammonium chloride
Arom. Spirits of Ammonia
Arsenic antidotes 1 and 2:
 1—Tr. Iodine
 2—Sod. carb. solution
Calcium chloride
Calcium chloride with sodium bicarbonate
Camphorated oil
Chalk, powdered
Charcoal, powdered wood
Chloroform
Ether
Eggs, 6 fresh
Hydrogen peroxide
Lead acetate
Milk of magnesia
Magnesium oxide
Magnesium sulphate
Mustard in one-half ounce envelopes
Paraldehyde
Potassium acetate
Potassium iodide
Potassium permanganate

Spirits of nitrous ether
Sodium bicarbonate: powder and tablet forms
Sodium bromide
Sodium chloride
Sodium sulphate
Starch,—dry and boiled
Tr. Iodine
Wine of Ipecac
Zinc sulphate

When a poison case is admitted, the nurse in charge pulls the emergency table away from the wall and opens *wide both* doors of the Poison Cupboard. She then fills with tepid water three pitchers, one of which has a dark handle; this is reserved for the antidote used in gastric lavage. These pitchers are placed upon a table at the right of the emergency table. The pan containing the stomach pump is filled with cold

water and is placed beside the pitchers upon this same table. Two large white tubs for the return flow from the lavage are then placed in position. To mitigate the shock that is always present, hot water bottles, *well protected*, are placed on the emergency table and the patient is covered with a blanket.

Emergency treatment is first administered by the police surgeon when he picks up the patient. At the hospital the order of procedure is:

1. Chemical antidote, if poison is known. Sometimes the antidote is again given in addition to what was used by the police surgeon.
2. Lavage. The chemical antidote may be added to the water.
3. Physiological antidote indicated by the condition of the patient.

After the treatment, if the patient is out of danger, he is discharged from the hospital, unless he is amenable to the law, when he is returned to jail. Should he need further treatment, like lavage, he is put to bed in the Forty-eight-hour Surgical Ward. If complications are likely to arise, as in mercurial poisoning, he is removed to the Neurological Ward for further study and treatment. A history is always taken of every case, and if the patient is admitted to the hospital, this history, with the admittance slip, is added to his chart.

Before locking its doors, what has been used from the Poison Cupboard is replaced by the nurse in charge. A record book for all poison cases is kept which carries personal and treatment data for the hospital records, also the

names of the nurse and doctor in attendance upon each case.

The year 1923 had an average of 240 poison cases treated. In their order, the cases cared for were due to the following causes:

1. Alcohol—largest number of cases
2. Lysol
3. Bichloride of mercury
4. Carbolic acid
5. Carbon monoxide
6. Veronal
7. Tr. Iodine
8. Strychnine
9. Chloroform
10. Ptomaines
11. Potass. permanganate
12. Lye
13. Sloane's liniment

Opium and its alkaloid, morphine, are rarely used now, but formerly furnished a number of poison cases. The part that alcoholic drinks played in connection with debauchery and its attendant depression resulting in attempted suicide was evident at the Denver General Hospital following the going into effect of the Eighteenth Amendment to the Constitution of the United States, for there was a marked lessening or absence of poison cases admitted to this hospital during the early morning hours of every Sunday. Prior to this time it had been the custom to make provision for additional cases during these early Sunday morning hours. That alcohol now occupies first place among the poisons used is an interesting commentary upon it as a habit forming drug, a fact to which altogether too little attention is given.

The Report of the Committee to Study Visiting Nursing is now available. Copies have been sent to Public Health Nursing Organizations, to State Departments of Health, and to all who have requested it. All others interested may obtain copies, without cost, by addressing the National Organization for Public Health Nursing, 370 Seventh Avenue, New York City.

THE SCHOOL OF NURSING AT YALE UNIVERSITY¹

By EFFIE J. TAYLOR, R.N.

IT was fitting that a school of nursing should be organized to succeed the Connecticut Training School on the basis of the Yale School of Nursing, as it is recorded that the Connecticut Training School was established soon after the Civil War because of the need for a system of nursing education to meet the demands of the community, and by the provision of the Rockefeller Foundation for the Yale School of Nursing it has been made possible to base its curriculum on the content of education required for the practice of the profession of nursing in the community.

May I call attention to one or two of the basic facts concerning the establishing of the Yale School and its relation to the University and also show how it differs from other schools of nursing in its purpose and opportunities.

To quote from an address given by Dean Goodrich to the Yale Alumni on February 22:

The school was made possible by a gift from the Rockefeller Foundation and the conditions under which this appropriation became available were: an improved plan of education, the shortest possible period of training and emphasis throughout the course on public health. The conditions imposed by the Rockefeller Foundation were based upon Miss Goldmark's findings which present indisputable evidence of the great waste of the student's time and strength; the failure to relate the theory to the practice; the failure to include in the professional preparation any such content of theory as the present development in the field of curative medicine would

seem to call for, and lastly to provide even an elementary foundation for workers in the field of preventive medicine.

An essential difference between this experimental school and the other university schools is the creation of a separate school of the university rather than a department of a hospital or another school such as the school of medicine. This implies that it has its own budget, its own faculty, and that it is in a position to base its curriculum on the content of education required for the practice of the profession in the community—not on the nursing care required by the patient in a given institution or organization, one of the weaknesses of the schools under the apprenticeship system.

On October 1, 1923, the faculty of the Yale School of Nursing, each member of which had been selected because of a particular experience which fitted her to help carry out the plan, formally entered upon its duties. Personnel:

The Dean of the School of Nursing;

The Associate Professor of Nursing and Superintendent of Nurses in the New Haven Hospital;

An Assistant Professor of the Principles and Practice of Nursing who is the First Assistant Superintendent of Nurses in the New Haven Hospital;

An Assistant Professor of Public Health Nursing who is the Supervisor of the New Haven Dispensary and Second Assistant Superintendent of Nurses in the New Haven Hospital;

An Instructor who is also Assistant Superintendent of Nurses in the New Haven Hospital;

An Instructor who is Supervisor of the Medical and Surgical wards in the New Haven Hospital;

An Instructor who is Supervisor of the Obstetrical and Pediatric wards in the New Haven Hospital.

You will note that each person on this faculty holds a dual position and

¹ Read at the Rhode Island League of Nursing Education, Providence, Rhode Island, June 5, 1924.

functions in the school of nursing on the teaching staff and in the hospital on the administrative staff. Each member of the faculty also carries certain courses in theory.

In addition to the group named, whose members occupy positions as instructors and assistants, we have another group designated as assistants in instruction who serve as supervisors or head nurses in an administrative capacity and teach the particular branch of practical nursing in the wards with which each is definitely connected. For example, the supervisor in the communicable disease department attends the lectures given to the students on communicable disease and correlates the theory and practice by nursing classes, ward demonstrations and daily conferences.

Still another group of instructors is concerned with the teaching alone. One is an assistant in the department of physiological chemistry, who at the same time is studying for her doctor's degree and, as a member of the faculty, teaches the courses in chemistry, nutrition and cookery. Still another instructor gives full time to conferences and the supervision of practical work and the keeping of records. These persons with the residence director, also a nurse, together with members from other faculties including the administration, medical, psychology, sociology, public health and physical education departments, the Visiting Nurse Association of New Haven and the head nurses of the New Haven Hospital, make up the personnel of faculty and instruction.

You will be interested in knowing to what extent the students in the Yale School of Nursing are to form a part of the nursing service of the New Haven

Hospital, and how much nursing practice they will have in the hospital wards. For a moment we will discuss the plan of the curriculum.

When the students have been duly registered in the school, they are entered as pre-clinic students and begin the course of instruction as outlined in the curriculum.

CORRELATION OF THEORY AND PRACTICE

You will remember we stated that one of the objectives of this school was to educate nurses to meet the needs of the community and to relate the theory and practice so closely that coördination of thought and action would inevitably follow. In order to make the practical application of theory assured, on February 7, when the students entered the school, they were introduced at once to the hospital wards and were given a picture of the patient in his environment. The general advisor and coördinator of courses accompanied the students on the trip about the hospital, pointing out certain outstanding and fundamental things in the construction and equipment of the wards, the relationship between one department and another, conditions which are general in hospitals and some which are peculiar to our individual institution and directed their attention to important principles on which the comfort of the patient in a ward depends, such as arrangement of furniture, light, sunshine, air space, etc. The first required exercise by the student following this lesson was a description of the visit and it was extremely interesting to note the difference in the emphasis placed on the various factors observed and the variety of impressions received by the individuals in the group.

The first direct correlation made between the theory and practice was in the study of anatomy. When the student was studying the bony structures, a visit was made to the X-Ray department where pictures of all types of bones were seen and malformations pointed out after which, on several occasions, the students were taken to the hospital wards and were shown the patients suffering from these conditions, while the actual conditions discussed in the university laboratory were demonstrated at the bedside of the patient.

During the period when the growth of tissues was being discussed, the students were again taken to the wards to observe the dressing of a child who had been badly burned and on whom the process of skin grafting was remarkably demonstrated. Other direct correlations were made during the study of physiological chemistry at which time the students were directly connected with the patients whose physical conditions were due to faulty blood chemistry or nutrition.

Direct correlation with the patient in the ward was made on several occasions during the course in psychology. Whenever a typical case could be found to demonstrate a statement or a principle, the students were introduced to these cases, were given an outline of the condition, and were shown the practical application of the principles involved. During this course, cases of cretinism, myxedema, aphasia, amnesia, and maladjustment of various kinds were demonstrated and explained and the student was directed to a study of the physical and the mental make-up of the individual in their relation to each other in both health and disease.

The teaching of practical nursing is being developed around a plan of case study. Instead of teaching bed making as a procedure, bed making is taught with the conception of a possible patient to occupy that bed, and every turn in the mechanical process is related to the patient in one way and another. To impress the student with this relationship, as soon as she was able to coordinate her movements sufficiently to work over a patient with some dexterity, all further practice took place in the hospital wards and at once, while simply engaged in acquiring skill in making a bed, she began a case study. She learned the patient's condition, found out what she could about her history, social as well as physical and mental, and immediately began to think of the individual as a whole, the hospital as a home or environment because of a certain present handicap, and everything within that hospital as related to the condition of the patient. Conferences were begun with each student and she was required to write up her cases and present them for criticism and discussion.

A great deal of stress is being placed on the keeping of records as they pertain to case studies and a member of the faculty is making a study of record keeping with a view to working out a set of record cards or sheets which will give the student a perfect picture of her experience. The method of keeping these records will constitute a course in the curriculum. It is understood that the records are not primarily the records which must be kept for the convenience of the hospital service, but are in addition, and to serve the student as a record of her nursing experience and to form a part of her own bibliography.

THE SAVING OF TIME

At the beginning we explained that the appropriation for the School became available on the basis that the course of instruction should be given in the shortest possible time, which was conceded to be approximately three college years or twenty-eight consecutive months, and also that it be an improved plan of education with emphasis throughout on public health.

The findings in Miss Goldmark's report gave evidence that in Schools of Nursing too much time was spent in non-nursing duties which were non-essential to nursing education. The theory and practice were too often unrelated, too little time was given to teaching and supervision and little or no time spent in preparing the student for her life work in the community.

It is obvious in any form of education that if extraneous material be eliminated, concentration centered on the important and fundamental principles, properly directed habits of study practiced, the time necessary for acquiring this knowledge can be materially shortened. It is also obvious that if one is to do one's best work and make the best use of the knowledge acquired one can not continuously be physically tired out. With these ideas in the foreground the curriculum was planned, and as far as possible what seemed a well balanced day of practical work and study was outlined.

The number of hours outlined in the curriculum in the practice of nursing procedures and in the actual care of the patients in the various departments of the hospital is approximately thirty-nine hours weekly. Some of you may feel that a sufficient amount of time has not

been provided for acquiring skill in the actual care of the patient, but it seems to me if we review our own bedside experience, few of us will find that we really spent a greater number than six hours a day in the actual nursing care of our patients. The essential difference therefore lies not in the fact that we are not giving enough time for the practice of nursing, but that the non-nursing duties have been eliminated and that bedside teaching and supervision are continuously carried on with the practical application of theory constantly demonstrated. This we feel is an improved plan of education and should, all things being equal, lead to the possibility of acquiring knowledge, technic and skill in a shorter time and in a more efficient way.

In discussing the relation of theory to practice, we referred to the way in which the fundamental sciences are related to the actual care of the patients in the wards, demonstrating that the value of practical and bedside teaching were at all times emphasized and that the fundamental sciences were taught in order to make possible a better and more intelligent care for the sick person and to provide a training in methods for the preservation of health. In the same way, throughout the entire course, emphasis is placed on the balance and correlation of theory to practice in every course. To bring this about the students have been divided into groups for theoretical and practical experience and courses of lectures or demonstrations will be repeated as often as is necessary to insure the proper relationship and sequence. Within each separate unit—medical, surgical, obstetrical, pediatrics and communicable disease, a cycle of

experience has been worked out, so that the student will proceed from the simple nursing technic to the more advanced nursing procedures within that unit. This will include as quickly as possible the entire nursing care of each patient assigned to her and she will be directed to study not only the physical needs of the patient but the mental, social and economic needs as well. By this means the student will be related to the public health and mental hygiene aspects of nursing, the foundation for which study is made by a course in the pre-clinic period on the social and economic aspect of disease, consisting of "lectures and excursions dealing with the factors fundamental to normal life and considering some of the common causes and results of sickness and maladjustment. The excursions are intended to familiarize the student with community social agencies." Later, courses in the elements of public health and the relation of the nursing profession to the community health program will be given. It is also planned that a definite experience will be given the students with the Visiting Nurse Association and opportunities will be made for other formal instruction in community health problems, particularly with the object of acquainting the student with the normal and abnormal child. To complete the cycle of experience in each unit the student will proceed directly from the hospital ward into the hospital dispensary and she will obtain the medical dispensary experience immediately following the medical ward experience or associated with it. The same sequence will be carried out in other units.

Short terms of night duty will succeed the day duty experience, but in

such wards only as offer experience of value to the student. Hospital house-keeping duties will be taught as essential to her experience and each student will perform, in the care of her patients, such duties as will contribute to her skill in maintaining clean and hygienic conditions for her patients.

In association with each theoretical course of lectures or classes, the public health and mental nursing points of view will be discussed by the instructors specially qualified to deal with these aspects of the subject, with the idea of directing the student always to a consideration of the patient as an "integrated organism," a human being with a personality in an environment preparing to go back into the community to live a normal life, instead of thinking of him simply as a sick physical being in a bed in a hospital ward for whom a certain number of medical and nursing procedures are to be mechanically carried out.

CONFERENCES

To preserve a spirit of unity and create a feeling of responsibility on the part of the staff concerned with the teaching program, group conferences have been planned and systematically organized with the result that each head nurse, each instructor and each executive officer has felt a certain personal obligation to forward every scheme to bring the experiment to a successful issue.

Great care has been taken in selecting the personnel of the staff and the whole program, as far as possible, has been outlined and discussed and the workers of each group have been given an opportunity to express their ideas and help develop the plan. Conferences have been systematically held on administrative

questions with the head nurses and weekly faculty meetings have been conducted by Miss Goodrich, the Dean of the school.

Another unique and interesting conference over which Dean Goodrich presides is a monthly meeting attended by the entire faculty, including the head nurses, with representatives from the Visiting Nurse Association, social service and administrative departments and occasionally members of other faculties giving instruction in the school of nursing.

We have left, with a real purpose, a discussion of the relation of the school to the hospital as the last point. As was previously stated by Dean Goodrich, the school was organized with three specific conditions in view, viz.: "an improved plan of education; the shortest possible period of training and emphasis throughout the course on public health." The gift from the Rockefeller Foundation made it possible to create this school within the university a separate unit with its own budget, thus enabling it to base its curriculum on the content of education required for the practice of nursing, not on the nursing care required by the patients in the hospital.

As indicated in the bulletin of the school of nursing, tuition fees are required amounting to \$600 for the twenty-eight months' course and during the four months' pre-clinic period the student must also meet the charge for maintenance, but during the remaining months she will be maintained by the hospital for which equivalent the student will be on duty in the hospital wards

on an average, six hours per day. It is quite obvious therefore that the nursing care of the patients in the hospital wards can not be provided wholly by the students in the school of nursing and that the hospital must estimate the cost of nursing care required and provide a suitable budget for this purpose.

Part of that nursing care at the present time is derived from the two remaining classes of students in the Connecticut Training School and by students from affiliated schools. The remainder is provided by graduate nurses on regular duty who act also as assistants to the head nurses within the wards.

The course of study for the students in the Connecticut Training School, in the time remaining for them to complete their training, has been reorganized to conform as nearly as possible to the plan outlined for the students in the Yale School of Nursing; shorter hours of ward duty have been assigned and an enriched curriculum has been provided. To arrange the work and provide a personnel to make possible a forty-four-hour week for all nurses, graduate as well as student, is well within the vision of the faculty.

Postgraduate and affiliated courses in theory and practice have been outlined in medicine, pediatrics and communicable diseases and graduate courses will doubtless be organized in the near future.

With vision and courage to wait, in a field so rich in experience and in an environment so full of opportunity, the possibilities for development seem almost without limit.

ADVENTURING WITH COOKS

BY ELIZABETH M. FOCHT, R.N.

I WAS coasting merrily through Miss Skillman's article in the August number of the *Journal* when I came to the paragraph on cooks,—there I stopped short. Oh, I went on later and read the rest but for a time that paragraph held me up. Now I raise no question with Miss Skillman; I have heard of irate cooks and believe they must exist, still my experience presents the exception and I rush to defend my cooks. In my concern I left off reading and rummaged through the suit case in which I am now living (it was under the bed as usual) and hauled out the little black book where I keep a memorandum of my private cases. I pondered over them. Where was the cook who had not befriended me and surreptitiously fed me? There were Rose and Sarah, Maria, four Annies, Katie, Agnes, Susan and Maggie, Sophie, Kitty, Freda, Bertha, Margaret, Theresa, Olga and more. Indeed I have often found the society of my cooks more agreeable to me than that of some of my patients; a deplorable thing I know and due to my lack of proper values, I don't blame my patients.

There is something mysterious about the way I affect the cooks; from their first sight of me their one desire is to feed me. While I cannot be called fat, yet I am not emaciated, and certainly by this time I can make no appeal through either youth or beauty. It began with my first case when I fell down the back stairs into dear, old, Irish Rose's kitchen and has continued to my present cook of Swedish extraction, who

let me in the front door after I had travelled seventy-five miles through the mountains behind an engine which barely made each of the many stations along the way in time to be resuscitated. It had only half a lung and I knew I ought to do something for it; but really I cannot be expected to carry an oxygen tank with me wherever I go. Perhaps the cook had travelled, too, by this way; whatever the reason, she ran true to form and headed me toward the kitchen. It was with difficulty that I restrained her; somehow I felt that I had better meet other members of the household before I ate of their food. She introduced herself as Gusty Svenstroeder. Right here I might say that the only trouble Gusty and I have ever had has been upon the subject,—Resolved that your name is more of a jaw breaker than mine. We are still at a deadlock.

I remember that Nora raced from her room in the attic to rescue my wash when it rained. How alarmed Maggie looked if I refused anything at the table and how she protested later when she got me alone somewhere in the rear! It was Sophie who ever came round with her, "Hist!" at my door, entreating to know what kind of chops I like best and would I prefer chocolate pudding to peaches with cream. As I took my departure Kitty burst into tears overcome with Celtic emotion and retreated down the cellar steps from whence she called smothered good-bys.

Saturday morning! and I could not convince myself that there was enough clean linen to last over Sunday, while

Annie was not supposed to wash. I fished some things from the hamper and accompanied by a low growling descended to the laundry. A cry rang down the back stairs. "Oh, Miss, Mercy! what is her name?—Oh, *nurse*, Father's trying to get out again!" An hour later the wash had disappeared; I found it flapping from the line, and Annie paring apples in the kitchen. "Annie," I said, "what *does* make you so nice." Annie's weatherbeaten face flushed, "Ah, weel, the pore auld monn," she said.

"Freda, Mrs. Jones thinks she could eat some custard,—there's some way you make it she says,—" Freda's stolid face was a mask. "Of course, I can make custard, but I don't suppose—"

"Ya, huh," remarked Freda, "bant no-boody can made costard yust lak me; you no mind you; Ay tink Meesus Yones she lak mine costard best, ya."

Then there was Katie. We were left much alone, Katie and I, with a forlorn old lady whose complaint, though never actually admitted, was insanity. Was anything too much for Katie to do? Did she grumble when twice I called her at night to stand by when the poor old lady went into a truculent and treacherous temper? If my patient refused to eat and we had to wait an hour or more till the mood passed, did the extra work and trouble upset Katie? Occasionally I dared neither to bring the old lady downstairs nor to leave her alone with anyone else. Did Katie mind setting up trays for us both? Did she ever refuse to watch when I was busied elsewhere? And Katie was ignorant as the day was long; her grammar was desperate and uncontrolled, but she knew what it meant to be a neighbor. If I was

ever condescending to Katie I am glad that I am spared any recollection of it. I do remember laughter in that shadowed house. The old lady liked it when we laughed and joined in pathetically.

And Rose,—Rose was my first, large and fat, her elbows no matter what she was at, rested comfortably on her hips. As I broke through the stair door that first day and introduced myself on all fours into her kitchen, how she called upon Saints Peter and Paul to help her and to preserve me!! How she worried over the lump on my head and felt of it daily! And, oh, how she fed me! She insisted that I was still growing and needed food badly. The last time I called there I must descend to see Rose and Mary, the maid. There were four pies on the table recently taken from the oven.

"Oh," cried Rose, "if 'tis not herself entirely and me wid words o' yez scarce out o' me mout'! I was spakin' but now to Mary, I was, and I sez, 'Mary' and all the while I was lookin' at they pies and I sez as I looked, 'Mary,' I sez, 'I'm after givin' me wake's pay gist for to see the noirse atin' of a pie wanst more.' We still are callin' yez noirse, Mary and me; we're always reymimberin' yerself but ever mislayin' yer name. 'Ah,' I sez to Mary, I sez, 'Mary, will yez be mebbly forgittin' the satisfyin' exprission she wore whin she ate?' 'Naver,' sez Mary, 'naver will I be forgittin' that same,' she sez and wid that,—in yez walks!" Here Rose began cutting a piece of pie and Mary brought a plate and fork.

"But, Rose—" I objected with great fortitude.

"Come right along o' me," said Rose,

leading me to the cellar stairs, "'tis no one will be botherin' us here at all."

"But, Rose—"

"Sit yez down on the top step, dearie, and be fillin' yer mout' wid other than words." She squeezed herself into the narrow passage, closed the door and snapped on the light. "A bit o' a squaze is naught so there's light for to see yez by. 'Tis blackberry pie ye'll be likin' best. I reymember it well."

There seemed but one thing for me to do.

I sometimes think that for novelty's sake I would like to fall in with one of these Hydra-headed cooks who invite skirmishes; yet I don't know,—I get very hungry at times. Of course I have thought a little about cooks since I first began to meet them. I was struck with what seemed to me the loneliness and monotony of their lives,—the kitchen and a little room up in the back somewhere or clear to the attic and no place for their company but the kitchen.

And no matter how gay the household was they were somehow outside of it all.

Yet there are times when I fear lest I have the wrong idea after all. I go along happily and comfortably until roused by some member of my profession who solemnly assures me that I am taking foolish chances with my dignity and position. To this I reply that the loss of any kind of dignity which interferes with peace and good will is just so much less humbug in the world. But, alas, that isn't the issue. It seems that I jeopardize not only my own dignity and position but that of the entire profession as well. This is a fearful thought and causes a cold sweat to break out all over me! Can it be that I should limit and measure the volume of respect for labor, of personal interest, of consideration and kindness that trickles down from my imperiled dignity to thirsty and perishing cooks?

MILD SCARLET

If parents, teachers, nurses, physicians, and others who come into contact with children will be on the lookout for early scarlet fever, especially its early symptoms, its spread may be prevented, says the *Weekly Health Bulletin* of the Detroit Department of Health. Cases of very mild scarlet fever, unless quickly isolated, will give rise to many additional cases. The mild cases are hard to recognize as the children are often not very sick. Mild cases may produce severe cases in other children. Watch carefully for headache, nausea, fever, a strawberry-like tongue, and later a rash. If any of these symptoms are present the child should be kept out of school and away from other children. Having done this, call the physician. For the sake of your own children and other children with whom they may come in contact look your children over carefully each morning. If in doubt keep the child at home and call the doctor.

PRIZE CONTEST FOR A ONE-ACT PLAY

The Committee on Publicity Methods in Social Work announces its second contest for a one-act play. A first prize of \$350 and a second prize of \$150 given by Joseph Lee will be awarded by judges chosen by the Committee for the best one-act play submitted under specified conditions. The prize winning plays will be produced under the auspices of the Committee on Publicity Methods in connection with the National Conference of Social Work in Denver, in June, 1925. Honorable mention will be awarded such plays as may be recommended for it by the judges. The Committee on Publicity Methods reserves the right to produce at Denver any other play submitted in the contest on payment to the author of a royalty of \$10. The contest closes on February 15, 1925. Information, rules of the contest, etc., may be obtained by writing to The Committee on Publicity Methods in Social Work, 130 East Twenty-second Street, New York City.

EARLIEST KNOWN CONNECTION OF NURSES WITH ARMY HOSPITALS IN THE UNITED STATES?

BY MAJOR JULIA C. STIMSON, R.N.

AN interesting document containing references to nurses in connection with military hospitals in the Revolutionary War has recently been called to the attention of the Superintendent of the Army Nurse Corps. This document, entitled "Continental Hospital Returns, 1777-1780" is an article reprinted from "The Pennsylvania Magazine of History and Biography", April, 1899, by John W. Jordan. It states that the originals of certain returns of the sick and wounded in the Continental Army in charge of Surgeon Francis Allison, Jr., had a short time previously been presented by his grandsons to the Historical Society of Pennsylvania. The documents are not only a valuable contribution to the medical history of the Revolution, but they appear to contain the first reference to the employment of women nurses in military hospitals.

Under the heading "A List of the Soldiers in the Court House Hosp^l at Reading Novembr 17, 1777," after a list of the names of thirty-eight soldiers and the names of the companies, appears the following:

Nurses.	
Sarah Burk,	Cathrine West,
Ann Chamberlain,	Ann Boyl,
Martha Michael,	Elizab th Southerland.

"A List of the Soldiers at Brick House Hosp^l at Reading, November 17th", has after it a list of names of twenty soldiers, and the following:

Nurses.	
Margaret Lenox,	Hannah Crooks.

"A Return of the Sick and Wounded in the Gen^l Hospital at Sunbury from 31 July to the 22^d of Sept 1779", has the following summary:

4 Wounder Officer,	2 Males,
Cap ^t Carbery.	Scott & Hamilton
Adjutant Hinton.	Apothecary.
Major Titcomb.	Henderson.
Cap ^t Clays.	Junior Volunteer.
Sick,	Jo ^s Kendal.
Cap ^t Rush.	Inspect ^r Officer.
— Benner.	Alison.
	Nurses 14
	Waiters 13
	1 H.

"A Weekly Return of the Sick and Wounded in the General Hospital at Sunbury from the 7th till 19th of December 1779, both Days included", has the following summary:

1 Wounded Officer,	Three Nurses.
2 Malis.	2 Officers Wives
One Comy.	2 Waiters.

These weekly returns of the sick and wounded contain the following diagnoses:

Putrid Fever	Bilious Fever
Inter ^t Fever	Peripneumony
Fever Inflam.	Cough & Consump ^t .
Fever Remit.	

The following notation is also interesting from the point of view of equipment:

William Dickinson joyned at fish Kills 15th Nov. 1778, and Received Cloathing as follows —One Coate, one west Coate, one pair of Briches, one Hatt, one Shirt, one pair Stockings, one pair of shoes, one Black Stock.

NURSING IN THE KENTUCKY MOUNTAINS

By EVERDEAN HARMELING

WE all remember the old, old fairy tale concerning the fairy princess who lived in an enchanted castle and was doomed to sleep one hundred years. At the end of this time, Prince Charming came and tore down the briars, cut down the underbrush, and penetrated the very forest surrounding the castle wall, finally awakening the princess and rescuing her from her lethargy and inertia. This old fairy tale puts me in mind of the conditions in the mountains today; the people are asleep and have been asleep fully one hundred years. Theirs is still the quaint Elizabethan speech. They "back" their letters according to the method of the old English post. The men sickle their grain and cradle their wheat. The women folk bind their brooms with corn straw. They depend upon the old hearth fire for cooking, baking and heating purposes. Their thought is primitive. They sing the rare old ballads as commonly as we sing our popular songs of today.

The Women's Board of Domestic Missions of the Reformed Church in America has striven for twenty-five years to play the part of Prince Charming in the mountains. They have torn down the briars of superstition and distrust. They have cut away the underbrush of stagnation and isolation and they are penetrating the very forest of hopelessness and helplessness surrounding the castle wall. They are about to awaken the princess, our people of the mountains, and to rescue them from their lethargy and inertia.

If I could only acquaint you with our purplish, misty hills of Kentucky!

It is here that you will ride constantly on horseback down the rockiest creeks, which you will learn to call roads, and up the most precipitous hills, where you may gaze down into dim valleys below and see the tiny log cabin nestled there among the rocks. It is this same little cabin which you will visit. Here you may find the occupants crouched about the fireplace telling stories of the fox or 'possum hunt. "Granny" tells about the feudal enmity between this family and the one in the neighboring hollow. The men give a recital of court proceedings, for all mountain men attend court as zealously as our base ball fans attend a base ball game.

The boards of the old cabin floor are in a state of upheaval, more or less, with broken ends and patches of soil showing here, there and everywhere. The roof leaks like a sieve during the rainy season. The doors of the cabin are on either end and remain open the year 'round allowing barnyard fowls to walk through as commonly and freely as do the members of the family. There are wooden beds in each corner of the room with dingy corn husk mattresses and a few tattered torn quilts serve as covering. In many, many of the cabin homes, there are no sheets or pillow cases.

In a "lean-to" at one side of the cabin is a crude table made by placing two heavy planks upon four upright posts. At one side of the table is a bench and around this table the family gather for their daily meals. They have perhaps three cups, three or four spoons and as many plates on which to serve their daily food, nothing more. Adults and

children alike lack warm clothing. They dress in tatters and rags. They have wretched food, they have wretched habitations. After viewing a typical cabin home, you, too, would realize the barren existence of the mountaineer. You, too, will realize that it is only the sturdiest and the fittest who do survive.

We have established three stations in the mountains. Roughly speaking, they form a triangle when seen on the map with McKee at the northern point, Annville at the southern point and Gray Hawk off to the right center. All stations are doing a noble and worthy work. It is at Gray Hawk, however, that you will find the Mary Isabelle Allen Memorial Hospital and it is from this hospital that the medical work radiates through the mountains for a distance of from forty to fifty miles.

We have four departments to our medical work, in each of which we endeavor to teach that Cleanliness is next to Godliness, that preventive medicine is far better than curative medicine and that right living is conducive to health and happiness.

Our first department consists of the wards of our hospital. It is here that the patient coming from his wretched cabin home has his first example and ideal of what cleanliness and orderliness may mean to health and comfort. Here you will find snowy white curtains before the windows with plenty of fresh air and warmth. There are clean white soft beds to lie in, with white enameled bedside tables and comfort kits. The floors are polished and are kept neat and clean.

Our convalescent patients are given magazines to look at and books to read. The women are taught the care of the

infant, how to sew and also how to cook the plainer and more simple foods, and how to make surgical supplies. The men have long court discussions and their common expressions are: "He will be ter law me" and "I will be ter law him." They also make trivial conveniences for the hospital and seem to greatly enjoy this. Last year we cared for one hundred patients in the hospital wards. This year, with superstition and distrust fast giving place to trust and confidence, we are bound to have many more.

Our second department includes the dispensary work. Here our mountaineer comes from all the most backward localities of our mountains—Wild Dog, Turkey Foot, Pigeon Roost, Little Sturgeon and Traveler's Rest, even all the way from Burning Springs to receive minor surgical attention such as the opening of abscesses and the care of the ear, eye, nose and throat. It is here in the dispensary waiting room that you will find the typical tall gaunt mountaineer. He keeps his broad brimmed hat placed squarely upon his head for he wishes to know just what we "furen" women are doing. He never asks a single question. He only states an incident and waits for your comment. In this way his questions are answered indirectly. The old "granny" sits on her side of the waiting room. She takes a huge twist of "tobaccer" from the pocket of her black cambric apron and cuts off a wad which she tucks away within her cheek while she peers out at you from underneath a black cambric sun-bonnet. She is the old "yarb" or "doctorin' woman" in the mountains and believes in charms and superstitious treatments but she is curious to know what we are doing and realizes that her trade

will have to give place to modern medical progress.

Next, our young mother comes riding up to the hospital on what she calls a rickety mule. She has two little tots perched up behind her and carries her babe in her arms while she guides the mule to the stile. She wishes to have Omer and Jobby "hexamined for thee toothache," and the baby has "the breastis complaint," but she comes for more than medical advice. She is only a girl of sixteen, for our mountain girls are often married at the ages of eleven and twelve. She craves a word of kind loving sympathy, for her burdens are far too heavy for those frail young shoulders and her road in life is long and dreary. We give our very best to our dispensary cases, for our contact with them is but slight in comparison to the contact we have with our other patients in the various departments. Last year we cared for 2,000 patients in the dispensary work alone. This year we are increasing even these numbers.

Our third department is the school or community work. Dr. De Jong sends out a public health nurse to all the free schools of the county which are the public schools of our section. The nurse takes with her a portable victrola and on it she plays musical gymnastic tunes, musical health talks and tooth brush drills which the children greatly enjoy. She tells the children that good teeth, good tonsils, good hearing and good eyesight are conducive to good health and good learning. She also tells adults and children that the four most prevalent diseases in the mountains are typhoid fever, hook worm, tuberculosis and trachoma and that they can be eradicated from the mountain cabin home

by closing up and cleaning the open polluted stagnant wells and by cleaning up the unhygienic conditions within the cabin. She teaches them that the hook worm larvae are carried between the toes of the barefooted children and adults and that hook worm can be eliminated from the mountain cabin home if the unsanitary conditions about the cabin are cleaned up.

It is very difficult for the nurse to teach the use of a separate wash cloth, towel, soap and basin in a family where from ten to fifteen wash their faces in a frying pan, it being the only receptacle which holds water, in the cabin. Then they wipe their faces on a filthy black rag, one which you would hesitate wiping your shoes with and the family soap reposes upon the rafters of the lean-to as an ornament and not as a useful article in any way. In this case the nurse provides wash basin, soap, towel and wash cloth and teaches its separate use for the individual afflicted with trachoma. She directs all persons suffering with trachoma to the "free clinics" held at the hospital, where they may have free surgical care, free medical treatment and free glasses if necessary. Children and adults alike are responding to our public health work.

Our fourth department is "Out-patient care" and it is by far the most difficult one. Dr. De Jong very often travels down trails where her horse sinks down to his knees in mud, where mountain boulders on the hillside are so slippery that she is in danger of being thrown from her horse and where creeks are forded when they are often swollen far beyond their banks. Mountain parents, however, realize that when Doctor De Jong comes in the dead of night to

administer antitoxin to their child who is dying with diphtheria and saves its life, she can be trusted, and their confidence is won and also that of their neighbors.

I am going to tell two stories which I might term the "Before and After" of our medical work in the mountains.

Some time ago, Dr. De Jong was called out in company with a nurse, to care for a boy of fourteen years who had cut his knee on a double bladed ax and was rapidly bleeding to death. We traveled down a seemingly endless trail where log-snake fences (as they are called) had to be let down and put up again as is customary in the hills.

Finally at the end of this trail two little ragged children ran out of a windowless cabin and told us to "geet down and stay all day." We dismounted and from the threshold of that cabin door we could see the boy's white face in the shadows and we knew that we would have to work very quickly to save his life. Doctor took her operating kit out of the saddle bag pockets which she carries with her constantly and together we cleared away the debris of mud, ashes, corn meal flour and chicken feathers that had been put upon the open wound to staunch the flow of blood. Doctor used an antiseptic, took nine stitches and bound the knee with a sterile bandage. She remained with the boy until he was out of danger. The lad recovered only after several weeks of intense suffering due to an infection. When Dr. De Jong explained to the mother that had she used simple cleanliness and medical precaution she could have saved her child all that intense suffering and herself all the anxiety, the mother said, "Doc, if I'd only had knowed hit I wouldn't had done hit!" And this pathetic statement we receive so often—If they only had known!

My second story is about Mandy, a young seventeen year old girl who was operated on at our hospital and remained with us for several weeks convalescing. When Mandy left, however, we did not think she would take home any medical training, for Mandy came

from a wretched and poverty-stricken family.

Several months later we were called to Mandy's section of the country, the Wind Cave Region, to see a patient and we decided to spend the night in Mandy's cabin. Imagine our surprise when we entered it, to find that Mandy had rejuvenated the place and had scrubbed the boards of the old cabin floor until they were white and clean. She had also scrubbed the hand-made chair at the bedside of her father who was a sufferer with tuberculosis and on this chair she had placed an old shoe box, into which the sputum papers were thrown and promptly burned on the hearth. A huge kettle of boiling water hung over the fire, for Mandy had been told that boiling water was the safest and cheapest disinfectant and she was using it freely in the sick room.

She had tacked up strips before the open door to keep out the flies and she had procured sugar sacking from a store house fully twelve miles distant and had sewn these strips together to make sheets and pillow covers for her father's bed.

After we were comfortably settled, she invited us into the "lean-to" and here we were served poached eggs, mashed potatoes, preserves and loaf bread, an unheard of diet in a mountain home. At eight o'clock we were shown our bed under the eaves, for eight o'clock is a very late hour for retiring in the mountains. We spent a comfortable night and the following morning Mandy brought in two shining basins, two strips of cotton for wash cloths, two brand new crash towels with "turkey red" borders and a plump new bar of Sapolio with which to wash our hands and faces. Our faces not only shone that morning but our hearts shone also, for we realized that Mandy had responded to our medical training and was "carrying on" in that little cabin home in the hills. Before we left, the father wanted us to sing "one of them thar hymn tunes" and we sang "Is my name written there?" while Mandy picked it off on her little old "dulcimer."

The people of the mountains are responding to our work among them, spiritually, educationally and medically.

They are our own true blooded Americans and it is up to us to lead them on to their rightful heritage, for they have gifts to bring from afar. They have the gold of perseverance and fortitude, they have the frankincense of responsiveness and quick-wittedness and they have the

myrrh of fresh energy and vigorous vitality. Let us point them onward, as the Star of Bethlehem of old pointed the Wise Men to the little manger, for they, too, will bring their gifts from afar and worship at the feet of our living Christ.

BEFRIENDING STUDENTS

BY WANDA M. CASWELL

FEW indeed are the maladies comparable in poignancy and intensity with the homesickness which comes to the average girl during her first few days away at school. What a tale of boundless misery one reads in the eyes of the young girl, separated for the first time from the care of loving parents and deprived of the accustomed security and protection of home! Out of a world of friendly associations, she has been catapulted into another world of busy purpose and strange activity. Her head is in a whirl, her spirit is weakening, and she experiences an overwhelming and irresistible urge for home ties. Her ideals of a professional career are wavering under the impact. She is facing her first crisis.

This incipient tragedy of the first few days away from home presents the first problem of the training school in dealing with the neophyte; but unlike the experience in other institutions of learning, the first impact is but the beginning of a climactic series. Conditions surrounding the new student grow increasingly trying before they get better. And this unhappy state of affairs grows out of the very nature of the profession for which the student is training. Students of nursing are young, full of enthusiasm,

buoyant in spirit and keenly alert to every romantic and inspiring influence of life. For them is reserved, however, the shock which attends the first contact with severe sickness and suffering, and the great grim experience of death.

To offset the psychological effect of a strange, grim environment and to soften the effect of the harrowing experiences in the presence of human suffering is a vital necessity. At the Bellevue Training School for Nurses, we endeavor to accomplish these ends through two agencies. The Board of Managers at Bellevue, composed of high minded, public spirited women, present the first softening influence to relieve the tenseness of a large intricate organization. The Social Director represents the second influence, working in conjunction with the Board of Managers and the Superintendent of the Training School as a sort of liaison officer to establish personal contacts and to carry out details of plans conceived in the interests of the student body.

These plans begin operating the day the student nurse arrives and continue to function throughout the entire period of her training. Each girl on her arrival at the Residence, as the girls' dormitory is known, is personally



THE BELLEVUE VILLAGE FAIR: THE JUNIORS' FAREWELL PARTY TO THE SENIORS, AN ANNUAL AFFAIR, TAKING PLACE JUST BEFORE GRADUATION

greeted by the Social Director, shown to her room and made to feel from the moment of her arrival that she has at least *one* friend in her new home to whom she may come for advice—and above all, sympathy.

Many is the girl who has come to me during her first week in training, the tears streaming down her face, discouragement in every line of her unhappy countenance, gasping pitifully between great sobs: "I just *can't* stand it!" And then, after a cosy cup of tea, in truth "the cup that cheers," and a nice heart-to-heart talk, how infinitesimal seem those once tremendous worries! Often, I have had girls come to me months afterward and say, "Do you remember the night I came to you, weeping like a baby and wanting to go home to my mother; and you talked to me and

made me want to stay? Oh, but I'm glad you didn't let me go!"

The upper-classmen, too, do their bit in helping to welcome and make happy our newest recruits, either by means of jolly get-together parties, informal teas, or some smaller form of entertainment.

On Sunday and on the weekly half-holiday, sightseeing trips are arranged, particularly for the out-of-town students, shopping tours, theatre parties, hikes, or any other type of amusement that may appeal to the girls. In other words, no girl need be alone or lonesome except by her own choosing.

Then, too, there are semi-weekly teas. On Tuesday and Friday of each week, tea is served for the entire student body, usually between three and four hundred being served. Not only does this offer a desirable respite in

the day's work, but it has a socializing influence as well. Faculty members come in goodly numbers, and the girls are enabled to meet their instructors in a way that makes for a better and deeper understanding between teacher and pupil. To these gatherings come also members of the Board of Managers, where, by virtue of the personal contact with the student nurses, they gain a broader knowledge of student problems and student needs.

Once a month, an informal dance is held for the student body, to which are invited the Medical Staff of Bellevue Hospital, where, under proper chaperonage and the most desirable conditions, the girls may receive their friends. In addition to the monthly dances, more pretentious dance-parties mark Thanksgiving, Christmas and other holidays.

For the lover of music, there are recitals and the Glee Club; for the athlete, the Swimming Club, the tennis court and hiking parties. During the winter months, for those girls who desire to be informed on the topics of the day, a weekly forum gives an opportunity to listen to speakers on current events and various timely topics. There are card clubs, there are theatre parties; and now and then, through the generosity of some of our patrons, there is a box at the Opera, at Town Hall and at Carnegie.

And to what avail is all of this? Situated as we are in the heart of the world's greatest metropolis, we are endeavoring to bring to each girl in the Residence, the life and activity which she naturally craves and needs, under the proper supervision and the most desirable conditions, so that she may not

feel the necessity or the desire to seek such amusements for herself in the Big City. And you who know the seamy side of a great city appreciate how many and how cleverly concealed are the pitfalls in the path of the young girl who finds her leisure hours unoccupied and who fares forth alone in search of pleasure and amusement.

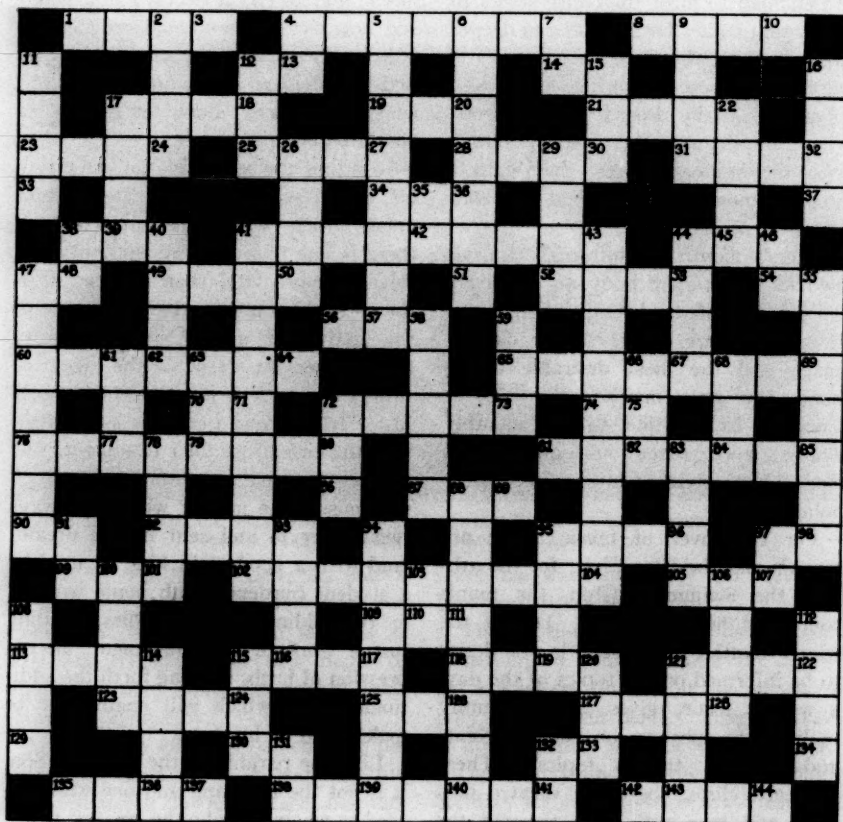
Granting the value of our efforts to fill the leisure hours of the student nurses with wholesome diversion—if there is one phase of my work which I consider more vital than another, it is the personal contacts which I have with the individual girls. Neither faculty member nor yet a part of the executive staff, I like to feel that I am to the girls just a friend; and that it is as a friend that the girls bring their troubles to me. It may be just a home-sick "proby," who misses the mother who has always tucked her in and sent her to dream-land with a good-night kiss; it may be a student burdened with home worries, or backsliding in her studies, needing just a word of encouragement, an expression of faith, to bring forth the additional effort which will enable her to make good in her work.

Like the parable of the Prodigal Son, it is not the thousand and one who succeed in whom we take the greatest pride, but the individual student who, but for a helping hand, a kindly word of advice, might have missed entirely the road to successful achievement.

While the work of the Social Department at the Bellevue Training School for Nurses is still in its infancy—only a few years old—we realize its possibilities and are happy in the knowledge of a worth while piece of work well under way.

A CROSS WORD PUZZLE ¹

BY ALICE M. OLSON, R.N.,
Dorchester Centre, Mass.



HORIZONTAL

- 1—Forehead.
- 4—Science of organic structure.
- 8—A hypothetic radicle.
- 12—Sight accommodation (Symbol).

¹ The editors believe that *Journal* readers will enjoy a medical cross word puzzle. No explanation of the method of solving such a puzzle seems necessary. The answers will be published in the February *Journal*. It will be interesting to know whether anyone is able to solve the puzzle without the aid of a medical dictionary.

- 14—Common abbreviation for consumption.
- 17—Seeds used as a cardiac stimulant.
- 19—The plant *secale-cereale* and its fruit.
- 21—Pertaining to the ear.
- 23—Pertaining to the mouth.
- 25—Either of large veins which open directly into right auricle.
- 28—A certain symptom.
- 31—The cheek bone.
- 34—Current strength of iodine (Symbol).
- 38—A form of facial neuralgia.
- 41—A local anesthetic.

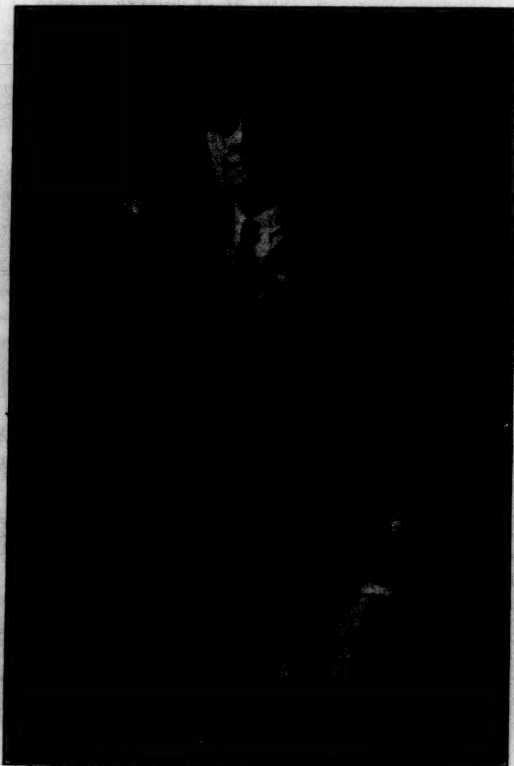
- 44—If necessary.
47—Erbium (symbol).
49—The choroid, ciliary body and iris as a whole.
52—Death.
54—Myopic astigmatism (Abbrev.).
56—Organ of hearing.
60—An abnormal curving of a limb.
65—Those skilled in diseases of the eye.
70—Before meals.
72—Expansile impulse of the arteries.
74—Left arm (Abbrev.).
76—Neuralgia of the sciatic nerve.
81—A poisonous oily fluid from acetyl.
87—Solution (Abbrev.).
90—Nitrogen and oxygen.
92—A poisonous East Indian tree which yields curare.
95—A transparent disc refracting light.
97—Left ear (Abbrev.).
99—Organ of vision.
102—Torn.
105—Anodal closure contraction (Abbrev.).
109—Sickness.
113—To gape.
115—Greek prefix meaning like.
118—A loop.
121—The horny lamina covering the back of terminal phalanx of each finger and toe.
123—Self.
125—Putrefaction.
127—Coagulum.
130—Milliampere (Symbol).
132—Bone.
135—Extremity of the heart.
138—The act of probing.
142—That part of the body between the head and the trunk.

VERTICAL

- 2—Mouth wash containing salol.
4—Of each (Abbrev.).
5—Congenital absence of arms.
6—Corpulence.
7—Yttrium (Symbol).

- 9—To disable by mutilation.
11—A globule of liquid.
12—A bag-like tumor.
15—A bending outward of lower legs.
16—A weight of 60 grams.
17—Potash.
22—Flesh.
26—Field of operation.
29—Technical name of an organ.
35—Selenium.
38—Terbium (Symbol).
40—Pointed crown of a tooth.
41—Pertaining to medicine.
43—Composed of lobules.
44—One-half Bismuth (Abbrev.).
46—According to rule (Symbol).
47—A dietetic casein-ammonium compound.
55—Organic contractile tissues.
58—A bubbling sound heard in the bronchii in disease.
59—A digit of the foot.
61—Mixture of Bismuth (Abbrev.).
63—A solution impregnated with another substance until it can hold no more.
66—Milk.
68—Matter settling from a liquid (Abbrev.).
72—A semi-liquid food for infants.
78—Intermittent fever.
83—Bones.
88—A salt of oxalic acid.
93—A proprietary dietetic remedy.
94—Pertaining to the femur.
95—The lower extremities.
97—Anodal closing (Abbrev.).
100—A contagious tropical skin disease.
103—Right arm (Abbrev.).
106—Membrane covering a part.
108—A membranous sac containing fluid.
112—Sulphate of potassium and aluminum.
114—An indurated swelling on a tendon.
115—The hip, buttock and thigh.
120—Anodal closing sound (Symbols).
121—The organ of smell.
131—Myopic astigmatism (Symbols).
132—A mouth.

WHO'S WHO IN THE NURSING WORLD



XLII. FRANCES M. OTT

BIRTHPLACE: Bedford, Pa. **PAR-
ENTAGE:** American. **PRELIMINARY
EDUCATION:** High school, normal
school, short courses in English litera-
ture. **PROFESSIONAL EDUCATION:** In-
dianapolis City Hospital; postgraduate
course Woman's Hospital, New York.
POSITIONS HELD: Superintendent of a
small hospital, 9 months; private duty,
many years; instructor in school of
nursing; instructor Red Cross classes in

Home Hygiene. OFFICES HELD: Vari-
ous offices in State Association, includ-
ing that of Chairman of the Relief
Fund Committee; member of the Board
of Directors of the American Nurses'
Association; Chairman of the Private
Duty Section of the American Nurses'
Association from its organization until
1924; speaker at many state and local
nurses' meetings. **PRESENT ADDRESS:**
Elkhart, Indiana.

EDITORIALS

JANUARY, 1925

STANDING on the threshold of another year—that stirring moment when a new stretch of life opens out before us—there must be few who are not filled with an eager longing to make a more worthy thing of that life. We are heartsick over our failures. We are impatient with our weakness, our ignorance. We want to shake off these and other hampering defects, and meet our obligations to our work and our fellows generously and fairly, with no self-seeking. We want to know how to use to the fullest the really great opportunities for human helpfulness which our task in its every field affords us.

The beginning of this New Year invites us to the kind of sturdy self-searching which seems the only way through which we can gain a firmer hold of our ideals, and set up a surer control over our weaknesses. Somewhere within ourselves, and not with others, or with conditions, will probably be found the causes of most of our failures. We like to believe this of our successes.

It does not do to think that we are concerned only with the present or the future—that the past is dead and done with, for it dogs our footsteps. That which we would do today, we cannot because at some past stages of our work our knowledge was not sufficient to guide us aright, or at a critical moment our insight, or our courage failed us. We cannot look forward at all, with intelligent purpose, without bringing a fearless and discerning judgment to bear upon our past work. For it is our foundation and on some parts of it we must build the structures of the future.

If they are to rise on right and noble lines, we must unfailingly assure ourselves that the foundations are sound and true.

There is much to cheer and encourage us at the beginning of the year 1925 as we review the work and achievements in nursing during the past decade.

Educationally, the gains are noteworthy, and Schools of Nursing, or programs of graduate and undergraduate study for nurses, appear in about thirty colleges and universities in the United States and Canada. One enterprising School of Nursing sees no reason why it should not be connected with two colleges. One's first thought nowadays on hearing of gifts of millions for a new university, such as that recently given in North Carolina, is apt to run something like this: "What an opportunity lies here for the Nursing Schools of that state."

Improvements within the Schools are growing in an interesting way to which one would like to devote pages. Of first importance, is the marked increase in the number of trained teachers and supervisors employed, and in consequence, a steadily mounting demand for their services which is quite beyond our power at present to meet. This is so vital a matter to our Schools, that we feel like making an urgent appeal to some of the universities with good schools of education, to take vigorous hold of this question, and see what can be done to train teachers of nursing in their sections of the country.

Of direct practical help toward better teaching as well as better nursing, is the growing and highly commendable

tendency in hospitals to employ graduate nurses for general duty. This lessens the demands upon students, and creates something in the way of a stable nursing service. A glance at the advertising pages of *The American Journal of Nursing* will show how large is the present demand for such workers.

There are pleasant rumours, too, of a better attitude in some hospitals toward their Schools of Nursing, and a good deal of the opposition of the past has given away to substantial coöperation. It seems reasonable to believe that much of this is due to the efforts made in the Report of the Committee on Nursing Education to clarify this situation. It would, of course, be wrong to assume that the progress made is very great. The theoretical work in most Schools (apart from the preliminary courses) seldom occupies more than the merest fraction of the student nurses' time. About three or four hours of class work a week in the second year, and one or two hours in the third year, with forty-eight to fifty-six hours of practical ward work still constitute the prevailing system. Nevertheless, improvements are steadily going on.

What seems an imperative reason for cheerfulness is the extraordinary growth in the number of nurses registered in the country. In 1922, there were 162,966 recorded. In January, 1924, the number had risen to 273,811. With the addition of the 50,000 student nurses in our Schools there appears to be pretty solid ground for believing that the need for nurses may be satisfied before long.

More impressive to some of us than these things which can be seen and measured, is the feeling one gets of a

certain fresh vigour and initiative pushing its way upward in our work. It is as if some confining bonds had been broken through, as if something which had outlasted its time and could no longer serve was dropping away. "Stronger than armies," says Victor Hugo, "is an idea whose time has come."

The improvements already made in our Schools, together with widespread publicity work extending over a number of years, have resulted in drawing into them a constantly enlarging number of well-prepared candidates. Every effort we know how to make should be put forth to maintain this status. There are still conditions in many of our Schools, and in some branches of our professional life, which make it difficult to interest thoughtful and far-seeing young women in nursing. This is notably true of the large and highly important branch—private nursing. In that field some difficult problems must be worked out before it will attract and keep the able women who are needed there, and who would naturally prefer it.

Among the tasks which the year 1925 should see attempted is a serious and extensive study of the work and life of the private nurse upon whose devoted and intelligent service three millions of seriously sick people constantly to be found in our population are depending.

Improvements in nursing in recent years are many and real. They are a matter for deep and genuine thankfulness. But there is still much true pioneer work which must be done, and the call to nurses in the unending battle with disease has still the ring of Garibaldi's last call to his troops. "Courage," says Barrie at St. Andrews

University, "is the thing." "All goes if courage goes."

"Fight on, my men," says Sir Andrew Barton, "I am hurt, but I am not slain. I'll lie me down and bleed awhile, And then I'll rise and fight again."

M. A. N.

LET US GET TOGETHER

THE instruction of nurses and the administration of the hospital should pursue identical or at least parallel paths if success is to be assured. Of late it would seem that these two primary responsibilities have shown a tendency to diverge. In their efforts to improve the nursing conditions, some leaders in nursing have urged the desirability for more theoretical and less practical training of the student nurse and some hospital administrators have placed emphasis upon the need of hospitals for a greater compensatory service by the student nurse. As usually happens when two who should live in peace and harmony fall out, both are right and both are wrong.

It cannot be denied that in many hospitals financial gain has been uppermost in the minds of administrators and exploitation of the nurse was adopted as a means of profit. Neither can it be denied that the trend of nursing education has been strongly towards the theoretical, not alone because of the value of theory but also because it was deemed desirable to establish the principle that nothing should be permitted in a school of nursing which would aid in the utilization of the student for the purpose of increasing the hospital's revenue.

Teaching is an important, if not the primary duty of a hospital and, while it is not possible for every such insti-

tution to be affiliated with a medical school whereby its facilities may be utilized for the preparation of physicians, yet instruction of some kind, either to nurses, internes, or the public, should be the ambition of every hospital. It is the duty of every such institution to adopt the best methods of pedagogy that its finances will permit. On the other hand, whether we like it or not, the financial conditions must be considered. Even in endowed or state-supported universities or colleges, students pay tuition. Usually students in nursing not only do not pay for their instruction, but in most instances they receive some allowance in addition to board, lodging and medical care. It would seem only reasonable, therefore, that the student nurse should contribute something of value to the hospital in the way of service. It would seem, also, that she would desire to do this. Endowment of nursing schools has been proposed. With some restriction, it should be encouraged. Yet I fancy every fair-minded young woman would feel better satisfied in the knowledge that she did not receive gratuitous aid when able by her own efforts to provide it.

It has been claimed quite frankly that no service should be exacted from the nurse after it ceases to be educational. Just where the line of demarcation should be laid down is rather hard to determine. I think it is quite generally conceded that one has not really learned how to do a thing until the process has become automatic and such proficiency is possible only after long and constant repetition of an act. A surgeon does not consider he has mastered the technique of his specialty when he has done one or two or three operations of each

kind that the human body may require. He knows that only by constant repetition of an operation can he become expert therein. On the other side of the case we must admit that hospital administrators have demanded service from the nurse that in no way concerns her education and this, too, when she could furnish compensation in ways that are helpful both to the institution and to herself. It is but honest to say that had our hospital executives always played fair with the nurses, the conditions which have caused discord never would have arisen. I would urge every superintendent to open his heart and his mind and do his utmost to provide the best instruction he possibly can for his nursing school. I would go further and urge that he provide such housing accommodations and recreational facilities as will bring the greatest satisfaction to his nurses. In so doing, not only will he be rendering justice to the nurse but he will be helping himself as well, for his hospital conditions as distinguished from his nursing school conditions will improve at the same time and the reputation of his hospital will steadily grow better. He will learn that his patients are receiving the same degree of thoughtful attention from his nurses that the nurses receive from him. Future advancement both of the hospital and the school of nursing depends upon the mutual helpfulness of each to the other. I believe that hospital executives and nursing authorities are learning this. I am looking forward to a better appreciation of these conditions and to a clearer realization by each of the needs and desires of the other. I believe that our hospitals and our schools of nursing are moving steadily toward the accomplish-

ment of greater and better things and I base this belief on the fact that both justice and self interest will be served thereby.

E. S. G.

"JEST VISITIN' "

"TAKE a ride and get a notion," said Heywood Broun in his column in *The World*. It was a happy suggestion as we are constantly in search of ideas, and we forthwith intimated to the Missouri State Association that we would welcome an invitation to visit its districts. You may have to "show" Missouri, but you have to show her nurses only once! The invitation came accompanied by a most carefully planned itinerary and so we "took a ride" to St. Louis and then up and down and across the state. It is a friendly state! The entire visit becomes a glowing memory because of the perfection of hospitality everywhere demonstrated. We had been fairly well informed about nursing in the two large cities. But it was a genuine satisfaction actually to observe such progress as that in the School of Nursing of Washington University which, during the past year, has become an integral part of the University. It was a privilege to participate in the joy of the St. Louis nurses who are making good use of their recently acquired club house. We had known nothing at all of the smaller places and it was with kindling enthusiasm that we met and discussed professional matters with some of the splendid women who are devotedly putting spirit and service of a high order into their work in small hospitals and schools, and who are alert to the needs of their communities, of their schools and of more rural nursing than they have yet had throughout

the state; although a growth of from one to thirty-two such nurses in five years is a very considerable accomplishment. We rejoiced to find an Official or Central Registry in Springfield, a town of only thirty-five thousand people, but serving a large rural area. It seemed unusual evidence of breadth of view and of sincere desire for genuine community service on the part of private duty nurses.

Leaving Missouri, we quite brazenly pulled the latch string of District Number One of the Illinois State Association and announced our intention of spending a week in Chicago. This is the only District Association, of which we have knowledge, which has an Executive Secretary and a really comprehensive plan of procedure. From personal observation, we should say that it is an investment that will bring rapidly increasing returns. How we enjoyed being entertained in the handsome club room! And how inspiring and stimulating we found it to savor the quality of the work being done by both institutions and public health nursing organizations. Most of all, it was heart warming to find the exceedingly busy women who are administering schools, hospitals and public health nursing organizations ready and willing to adjust plans and make arrangements tending to conserve the time and energy of the observer. Not a moment was lost. Plan dovetailed into plan in a most remarkable way. Our Chicago friends demonstrated efficiency of a high order coupled with true professional spirit, a spirit that makes its possessors eager to share with others any knowledge they may have gained, by personal interview or through the pages of our magazine.

We took a ride and got many notions which we shall utilize for the benefit of our readers. We shall cherish the memory of meetings great and small, of formal and informal conferences, of that most outstanding privilege of all—the satisfaction of meeting and addressing many student nurses—that magnificent body of young women now preparing to “carry on.” Our major notion is merely an old idea enriched and strengthened—our profession, as represented by this cross-section, is marching forward in stalwart fashion, not alone because of the high quality of the leadership it has had throughout the years but also because of the high quality of those who follow that leadership.

THE JOURNAL IN 1925

THE *Journal* for 1925 will be better than ever! This is neither idle boast nor journalistic bombast. It will be better because the profession of nursing, to which it owes its being, is growing year by year in vision, in aspiration, in actual accomplishment for social betterment and in durable satisfactions to the majority of those who practise it. It will be better because of the vital, constructive and prophetic influence of the hundreds of nurses throughout the country who are assisting us directly and indirectly to the end that the magazine may be truly representative of all sections, all types of service, and of the most constructive professional thinking.

Valuable material is now in preparation for its pages. There is more in prospect. The problems of the schools will continue to occupy much space, since this is a fundamental need if we are to go forward, and teaching programs can best be advanced if the

profession as a whole is informed and sympathetically interested. Advances in a multitude of organization activities such as legislation, will be duly chronicled. Not for a moment will the needs of individual nurses be lost sight of. We shall be of more service to the great army of private duty nurses than ever before, as we expect to act on many of the suggestions which have been received as to their needs, suggestions for which we are most grateful.

One radical change in make-up—not in content—will be noted. Beginning with this number, the Department of Public Health Nursing which has been so ably edited for years, first by Edna L. Foley, then by Ada M. Carr and again by Miss Foley, will be omitted. This is not due to lack of interest in public health nursing. The *Journal* will continue to carry material of general interest from this field. It is often so difficult to decide what is public health nursing and what is not that it simplifies matters to carry such articles as that by Miss Harmeling in the open pages rather than under any departmental cap-

tion. Perhaps this augurs well for the rapid approach of the time when that oft-expressed ideal of Miss Goodrich's, "Every nurse a public health nurse," will be realized. The suggestion on which action was based came from the National Organization for Public Health Nursing, which holds itself responsible for the publication of technical public health nursing material in *The Public Health Nurse*. The question, which will arise in many minds, as to the wisdom of supporting directly or indirectly an increasing number of nursing and health periodicals is beside the point and can best be answered by each nurse individually. We shall continue to serve the nurses of the country as best we may with the light and the resources at our command.

We begin the year in a most optimistic mood. We revere the past, we thrill to the effort of the present, we have faith in the future of nursing; and to every nurse, everywhere, we therefore wish a New Year filled with opportunity and the happiness that comes from satisfying achievement.

DEATH OF DR. A. R. WARNER

Nurses who are members of the American Hospital Association will be shocked to hear of the death of the Executive Secretary of the organization, Dr. A. R. Warner. Although Doctor Warner had been ill for nearly a year, the loss was unexpected, since he was apparently recovering. Doctor Warner was Superintendent of Lakeside Hospital, Cleveland, for six years before becoming Executive Secretary of the American Hospital Association in the fall of 1919. In 1918 he had been its President. His earnestness and enthusiasm in the organization of Hospital activities won for him not only nation-wide, but international, recognition.

PUBLIC LIBRARY SERVICE FOR HOSPITALS

The Public Libraries of Bangor, Maine, and Gary, Indiana, have recently inaugurated hospital library service. That in Bangor is provided for the Eastern Maine General Hospital, that in Gary for Mercy Hospital and the Gary Hospital. The libraries provide the books and magazines and the service of a librarian. The hospitals provide suitable space and the necessary equipment including book trucks.

DEPARTMENT OF NURSING EDUCATION

LAURA R. LOGAN, R.N., DEPARTMENT EDITOR

NEW METHODS OF EXAMINATION¹

BY MARY BROOKS EYRE, M.A., R.N.

[*Department Editor's Note: Inasmuch as psychological tests and methods are beginning to be applied in the field of nursing education in various parts of the country, it seems timely to publish certain of these studies in this department. They promise to be of some value. How much, will depend upon the extent of the researches made and upon the care with which the results are interpreted and evaluated.*]

THERE is always a thrill about investigating something new whether it be a continent, a scientific discovery, a mountain trail, or a recipe for salad dressing. Therefore, when the invitation came to speak on new methods of examining in theory and practice of nursing, I accepted joyfully.

You will notice that I include *practice* of nursing. That had always been a hard matter in which to examine students, especially in our State Board examinations, and I may hasten to say that the measures I am now advocating are not a solution of that difficulty, but only a step in improvement over old methods.

The problem which confronts those who have to frame examinations for professional workers deals immediately with this two-fold aspect, the *theoretical* and the *actual*, or "practical."

Elizabeth Kemper Adams,² organizer of the Professional Section of U. S. Employment Service in Washington, in defining a professional worker, says:

¹ Read at the annual meeting of the California State Nurses' Association, Pasadena, May 22, 1924.

² Some New Professional Standards for College Women, *Educational Record*, April, 1920.

In general, a worker shall be considered professional who is equipped by ability, education and experience to maintain and to improve standards of operation in the work in which he is engaged; to know both why it goes right and what to do when it goes wrong. He should feel an objective and disinterested intellectual interest in his work, and a high sense of social responsibility, not only to his own group, but to the Community at large. He is, therefore, qualified to assume positions of increasing responsibility.

An examination of the nurse should test her fitness and ability to care for the sick; to know why a certain procedure goes right, and what to do when it goes wrong. This presupposes and includes intelligence, but it is something more than that which we set out to measure, namely the results of *training*.

The methods used in testing native mental ability (which is in reality the power to learn) may be applied equally well to testing *achievement* or power to demonstrate what has been learned. For this reason, we term the new method of measuring the knowledge which a nurse has acquired, the Nurses' Achievement Test. In June, 1923, this type of examination was given under the auspices of the Nurses' Bureau of the California Board of Health at the regular examination for licensure in two subjects: (1) Anatomy and Physiology, and (2) *Materia Medica* and Medical Nursing, and the resulting data statistically treated.

The results were so satisfactory that this type was used for five subjects at

the next examination, October, 1923, and in five subjects in February, 1924. Upon the data so obtained our conclusions are based. We will consider State Board questions in discussing the use of the method, though it will serve equally well for examination in the class room.

This method has come into extensive educational use recently, for school and college examinations, under the name of "educational tests" or "informational tests." Columbia University has been a pioneer in this respect for academic work. Several of the forms, or "moulds" as they are sometimes termed, were used in the Army Intelligence Tests, and were adapted originally from the mental tests devised by Binet and Simon in 1903, so that their "newness" (with one exception of a test devised by the author) lies merely in adapting them to nursing subjects.

The old form of examination consisted of the traditional ten questions in each of the allotted subjects, the meaning of which the student had to puzzle out for herself. Often the intent of the question was ambiguous and equally often was misinterpreted by the student, as is shown by the answers.

As Professor Ben D. Wood of Columbia pertinently observes, apropos of written examinations:

It is difficult to understand how such a scheme could be very much safer than the discredited method of personal judgment. * * * The personal factor is far more powerful and insidious than we are accustomed to think.

The written examination consists of five to ten short essays on designated questions supposed to show the student's power of organization. What this power is, is left to the good sense of the individual instructor, as is also the appraisal of any given sample of it.

In practice, it would appear that an influential feature of the written examination is sheer mass of reproduction, coupled with any manner of evidence of the student's astuteness in guessing the intent of the question. In the last analysis, grades are whatever the individual instructor makes them.

Perhaps the most classic instance of this lack of uniform grading is that of Starch and Elliott, 1912-13, in which a final examination paper in first year high school English was graded by 142 English teachers in as many high schools in the United States and received grades from 64 per cent. to 98 per cent. Another paper under the same conditions was graded from 50 per cent. to 98 per cent.

A final examination paper in Plane Geometry, graded by 114 mathematics teachers, was given from 28 per cent. to 92 per cent.

In State Board examinations, the old method occupied at least two days of the applicant's time. With nine subjects, four must be written in one day, and five the next. By the close of the second day, the student would be exhausted. Each examination occupied at best from one and one-half to two and one-half hours; the subjects considered hardest by the Board were customarily chosen for the first day. These were Anatomy and Physiology, which yielded the highest percentage of failures, and Materia Medica. The papers on the second day, especially those on subjects given last, usually showed evidences of fatigue and *laissez-faire*.

Even in dealing with objective tests, McCall states:³

³ *Journal of Educational Research*, June, 1920, New Kind of School Examination.

It is possible, especially in very long tests, that the chief factor measured is not the ability desired, but *fatiguability*. Tests should be of such a length or so constructed as to eliminate fatigue, particularly if some of the pupils fatigue more easily than others.

If this be true of the new form, how much more of the old style essay type! How exhausted we have all been, after writing for several hours.

But the chief objection to the old style of examination was that it did not measure what it purported to measure, namely knowledge of procedure in nursing the sick. Questions involving long detailed answers were only partially answered, because when the student omitted details, *there was no way for the examiners to know whether they had been omitted from accident or from ignorance!* Hence a nurse poor in verbal expression but good in actual nursing practice, might be debarred from licensure, or be penalized in her grades, undeservedly. In an examination for licensure of nurses this may be far more serious than in a purely academic examination.

In making the original experiment, the "new" or objective forms were selected with regard to the nursing subjects to which they would be most applicable. As wide a variety of forms as possible was utilized. The forms used in the first instance were: In Anatomy and Physiology, the "recognition" or choice of the correct one out of four possible answers; in *Materia Medica* and Medical Nursing, the "completion" form; in Pediatrics, true-false form; in Hydrotherapy and Massage, the true-false (modified form); in Dietetics and Ethics, the "judgment" (selecting the best answer out of four

possible); in Hygiene and Bacteriology, "recognition" form; in Obstetrics and Surgery, new form (devised to show practical technique).

In general, the requirements for a good test must be based upon the following broad lines:

1. It must measure results of what has been learned.
2. It must minimize fatigue.
3. It should provide opportunity for all pupils to demonstrate their abilities in the defined field.
4. The elements must be of equal difficulty.
5. Its material must be selected with reference to
 - (a) comprehensiveness of the field to be covered.
 - (b) relative value of informational items, i.e., facts that are important for the student to know should be chosen, rather than irrelevant facts or "catch" questions.
6. It must be easily, accurately and objectively scorable.
7. Instructions in carrying out the test must be clear and explicit.
8. Finally, to satisfy statistical requirements it must be valid (reliable and referable to a defined zero point in terms of a defined unit).

An advantage of the new form is that it takes not only less time, but that it admits of many more elements (questions), thus covering more ground and giving the candidate a better chance to show her range of knowledge in each subject.

If she misses a question, her grade is

less damaged, than where each failure cuts off 10 per cent.

Non-coachability is another advantage of the new form. In connection with educational tests, Wood⁴ says:

A candidate might spend a month memorizing every question in September, 1919, examination without being helped appreciably on the January, 1920, examination, because only the form of the questions would be familiar. * * * The solution of the coaching difficulty is not to try to prevent prospective candidates from familiarizing themselves with the types of questions and tests in the examination, but rather to take every precaution to insure that *all* candidates shall have a free and equal opportunity to acquaint themselves with the examination. One form ought to be published and advertised widely as the *type* of the examination which will be used; and every prospective candidate ought to be urged to study the forms of the questions. The effect of this device would be to raise the average score on the examination, but the relative positions of the individuals would be nearly the same, possibly a little more reliably placed, due to the elimination of one unreliability factor, the interpretation of directions.

This quotation is given at length because of its pertinency to the nurse's test.

When once the form or mould of nurse's test has been adopted, many sets of elements may be standardized; and a specimen form may be printed for information of prospective applicants, and also for schools of nursing, so that teaching may be improved.

On June 22, 1923, tests in Anatomy and Physiology and Materia Medica were given at the regular examination held in the City Hall, San Francisco, replacing the essay style of examination in those subjects. Other subjects were

given by the old method, as the Board of Health thought it unwise to introduce more of an innovation at this time than the two subjects chosen in the new form. The subjects chosen were, as shown by the results of former examinations, the most difficult ones.

Method.—The applicants, seated at separate desks, were each given a sheet with the mimeographed test. Instructions were given by the writer not to begin until the "Ready-Go" signal was given. No time limit was set, but applicants were asked to rise as soon as they finished. The papers were then immediately collected by proctors. The applicants were known by number only, as is the custom in State Board examinations.

The minimum time taken in Anatomy and Physiology was three and one-half minutes; maximum time, seventeen minutes. The next best time record was four and one-half minutes. Four applicants finished in five, and five applicants in five and one-half minutes. The mode was ten minutes.

In Materia Medica, the minimum time was nineteen; and the maximum, fifty-three minutes, with a mode of thirty-five minutes. The Materia Medica test covered more ground and consisted of more parts in each "question" or unit than Anatomy and Physiology, which accounts for the difference in time occupied by the two tests. No attempt was made to approximate them as to time. The time taken for the old style of tests in these subjects ranged from one to three hours and the number of questions was restricted to ten. These two tests were given at the beginning of the first session of the examination, with Anatomy and Physiology

⁴ Measurement in Higher Education.

first. The attitude of the applicants was at first tense and curious. Few, if any, were familiar with the form of psychological test. The attitude quickly became one of confidence and even of pleasure; the simplicity of performance put them at ease, so that there was less apparent anxiety over the succeeding *Materia Medica* test, though it was the longer of the two. This attitude was in marked contrast to the dread with which these applicants had approached the examination, and several applicants told the writer and the proctors that they had added confidence in approaching the old style examinations which followed these tests. Later, the applicants who took these new forms of tests expressed very general satisfaction. They stressed the point to their Instructors in their former Schools of Nursing, that the wording of the tests made it much clearer as to what was wanted than the old style of question. This undoubtedly was a factor in making a better distribution in the score than in the old (essay) form. (See graphs.)

In the October, 1923, examination, more subjects were given by the new method, and a larger number of elements (questions) were included, in order to give a better range for the applicant. In Bacteriology and Hygiene, minimum time, five minutes, maximum twenty minutes; in Pediatrics (True-False Method), minimum five minutes, maximum twenty-five minutes; in Anatomy and Physiology, minimum fifteen minutes, maximum thirty-five minutes; in *Materia Medica*, minimum ten, maximum forty minutes; in Ethics, minimum three minutes, maximum thirty minutes.

When we compare these records with the old laborious written examinations, and further when we recall that the time saved may be stated in terms of nervous energy, we realize another advantage of the new method.

In selecting the form for each subject an effort was made to abide by McCall's dictum:⁵

In selecting or constructing tests they should be carefully studied to discover whether everything possible has been done toward the elimination of irrelevancies in instruction, and in the organization and wording of the test elements.

If the form or mould of a test duplicates the pattern of the pupil's mental processes in performing an actual task, the form of the test is not an irrelevancy.

The results of the educational or "content" examinations at Columbia have been carefully worked out. It was found there, as in the Nurses' Achievement test, that the completion form gave the best results by whatever criterion it was judged. It proved to be an excellent type for nurse's examination, saving the applicant's time by having the sentence written except for the crucial word or words which she was to supply in the blank space left for that purpose. This is an exceedingly useful form for tests involving technic, where a large amount of detail is required. The test sheet is given to the applicant who fills in the blanks and returns the same sheet.

Completion tests are less objectively scorable than either recognition, true-false or judgment tests. Monroe says that this is the case,⁶ and Wood corroborates this:

⁵ How to Measure in Education.

⁶ Theory of Educational Measurement.

The reading and completion test require some judgment on the part of the scorer, but by careful use of the keys furnished with the examination blanks, the scoring of these tests becomes almost as objective as that of the "opposites" test.

The true-false form ranks next as a satisfactory form for nurse's examinations. It involves accurate clear-cut statements, which admit of only one answer, yes or no. This is the sort of situation which the nurse is called upon to face many times in her experience. The true-false is capable of being objectively scored, mechanically by use of a key.

The fact that the true-false test calls for full credit, or no credit in scoring is sometimes brought as an objection. The chance of guessing is obviated by the right-minus-wrong method in scoring. The number of wrong answers is subtracted from the number correct, and the result is the score or grade which the student has obtained.

The "recognition," or choice of one out of four possible answers, ranks next in value. It was used successfully for Bacteriology and Hygiene. The "practical judgment" (selecting the best answer) test seemed especially fitted to Ethics which lends itself, as a subject, to statements requiring discrimination and knowledge of principles of human conduct.

An attempt was made to use the "same-opposite" (synonym-antonym) test for several of the subjects in the nursing school curriculum, notably Pediatrics and Dietetics but after repeated efforts it was found that the "same-opposite" form did not give sufficient scope to indicate the student's knowledge in any one subject. For the same

reason, the "part-whole," "object-attribute," and "cause-effect" forms were not practicable.

A new form of test was devised for surgical nursing intended to give a wide range for practical procedure. Instruments and appliances necessary for surgical treatment and for operations are to be assembled in plain sight of the applicant, each of which is marked with a number. Papers are to be given the applicant, each bearing ten series of numerals from 1 to 34. The directions are that the demonstrator shall say: "You see here surgical instruments, dressings and appliances, each with a number. Indicate those which you think would be needed for each of the following procedures, by drawing a line under the number which designates the instrument or object you mean."

The procedures chosen are inclusive of a wide field of surgical knowledge; and the time-saving element of this test, by underlining numbers instead of writing long lists of instruments, as in the descriptions of procedure necessitated by the old essay form of examination, is intended to give opportunity for the applicant to show her practical ability as a surgical nurse. The same form was applied to obstetrics. It provides for the most important procedures during and after delivery, and for the care of the newborn baby.

The following are copies of the tests given as described above:

EXAMINATION IN ANATOMY AND PHYSIOLOGY

INSTRUCTIONS: Put a plus sign (+) before statements you consider true and a minus sign (—) before those you consider false.

1. Saphenous is the name of a vein.

2. Coronary is the name of an artery.
3. Invertin is found in saliva.
4. Pleura is a mucous membrane.
5. Omentum is attached to the intestines.
6. The ciliary muscle is in the eye.
7. Pericardium is a serous membrane.
8. Synovial fluid is in internal ear.
9. Patella is in the knee.
10. Acetabulum is in the shoulder.
11. Zygomatic arch is in the foot.
12. Gastrocnemius is in the stomach.
13. Pectoralis major is a chest muscle.
14. Thoracic duct is part of the lymphatic system.
15. Pancreatic juice is found in stomach.
16. Renal artery supplies.
17. Thyroid gland is in the neck.
18. Perineum is in the abdominal cavity.
19. Pneumogastric is a cranial nerve.
20. Gall bladder is in the pelvis.

EXAMINATION IN PRACTICE

(Group)

- I. To prepare a patient for laparotomy:
First, _____ the skin; then _____ the skin by _____ with _____, and put on _____.
Stop all food _____ hours before operation. Bowels should be _____. Bladder should be _____. Care should be taken before giving an anesthetic that _____. Patient's hair (if a woman) should be _____. Remove _____.
- II. To make a surgical bed (ether bed):
Protect mattress by _____.
Place extra blankets _____.
Bed should be warmed by _____.
Bed should be protected from vomitus by _____. Pillows should be _____.
- III. Protoclysis:
Protect bed by _____. Patient placed in _____ position, knees _____. Container should be hung _____ above bed. Rate of flow should be _____, for the reason that _____. Flow may be regulated by _____.

Tube may be warmed by _____.
Temperature of solution in container should be _____. Solution may be kept at proper temperature by _____. Before inserting, nozzle should be _____ by _____, lubricated with _____ and should have _____ expelled by _____. Nurse should insert nozzle _____ in _____ direction, taking precautions with regard to _____. If not otherwise ordered, amount injected should be _____. Bed should be kept _____; patient's binder or dressings should be _____, and _____ if soiled. Patient should be kept warm by _____.

IV. To give a hypdermic:

Read _____ carefully; _____ syringe by _____; needle by _____; in _____; draw _____ into syringe and expel in _____; next _____ tablet in _____ and draw into syringe; screw on _____, making sure there is no leakage; expel _____ by _____. Protect needle by _____. Prepare skin at site of injection by _____. Grasp _____ gently with _____; insert needle _____ in _____ direction; withdraw slightly and inject fluid _____, taking care not to _____. Withdraw _____. treat site of injection by _____. In giving hypodermic, always select muscles in part of _____ or _____ avoiding _____.

- V. Emergency treatment of a compound (open) fracture: Check _____ by applying _____. Cleanse around wound by _____. Protect wound by _____. Support fractured parts by _____.

VI. To give hypodermoclysis:

Procedure: Prepare patient by _____ site of injection with _____. Temperature of solution

in container should be -----
 Container for solution should be sterilized by ----- and hung ----- above patient. Before injecting solution, tube is warmed by ----- and air expelled by ----- Needle should be ----- and touched only by ----- hands. After needle is withdrawn, the site of injection should be protected by ----- Absorption may be hastened by ----- If not otherwise ordered, the site of injection selected is ----- and amount of solution given is ----- After hypodermoclysis, the record on the patient's chart should include -----

EXAMINATION IN SURGICAL NURSING (Group)

Assemble: 1—(a) catgut, (b) chromasized gut, (c) horse hair, (d) silk worm gut, (e) linen. 2—Needle holder. 3—Straight and curved needles. 4—Haemostats and clamps. 5—Scalpel. 6—Tourniquet. 7—4 in. bandage; 2 in. bandage. 8—Roll absorbent cotton. 9—Flask for salt solution. 10—Hand brush, gauze, basin. 11—Scissors. 12—Sterile sponges. 13—Sterile towels. 14—Iodine. 15—Luer needle for lumbar puncture. 16—Syringe. 17—Splints, (a), (b), (c), (d). 18—Sheet wadding. 19—Retractors. 20—Specula. 21—Curved forceps. 22—Irrigators. 23—Douche point. 24—Glass catheters, rubber ditto. 25—Spoon, dull and sharp curettes. 26—Delivery forceps. 27—Cautery. 28—Sterile gloves. 29—Adhesive plaster. 30—Ether, nitrous oxide. 31—Stimulants. 32—Vaseline. 33—Emesis basin. 34—Tongue depressor, tongue forceps.

EXAMINATION IN SURGICAL NURSING (Group)

Instructions: Demonstrator: "You see here, surgical instruments, dressings and appliances, each with a number. Select those which you think would be needed for the

following procedures, by drawing a line under the number which indicates the instrument or object you mean."

- I. Preparation for curettage.
- II. Preparation for lumbar puncture.
- III. Preparation for Caesarian section.
- IV. Preparation for Body cast.
- V. Preparation for compound fracture of thigh.
- VI. Preparation for dislocated hip.
- VII. Preparation for Colles fracture.
- VIII. Preparation for fractured skull.
- IX. Preparation for anaesthetic tray.

As an illustration of the right-word test method, the following nine questions out of a series of twenty are quoted from one of our tests in bacteriology, hygiene and communicable diseases. The instruction given the students is: Draw a line under the word that makes the sentence true.

1. Diphtheria is caused by: bacillus typhosus; gonococcus; Klebs-Loeffler bacillus; Frankel's bacillus.
2. The most dangerous infective agent in tuberculosis is the breath; urine; sputum; perspiration.
3. A micro-organism that feeds upon a living host is called a neuroblast; parasite; lymphocyte; saprophyte.
4. Decay after death of organic matter is caused by the action of saprophytic, pyogenic, pathogenic, parasitic organisms.
5. Infection is due to oedema; inflammation; stasis; micro-organisms.
6. Bacteria are microscopic: plants; animals; insects; molecules.
7. Drinking water is best sterilized by: filtration; aeration; boiling; chlorination.
8. Bacteria multiply by fission; spore formation; incubation; suppuration.
9. Typhoid vaccination ensures: anaphylaxis; segregation; disinfection; immunity.

(To be continued)

PLANS FOR THE REORGANIZATION OF THE NATIONAL LEAGUE OF NURSING EDUCATION AND STATE LEAGUES OF NURSING EDUCATION

THE Revised Constitution and By-Laws of The National League of Nursing Education, completed and voted upon at the Detroit Convention, June 1924, will be published in the 1924 Annual Report, which will be ready for distribution some time in January. Reprints will also be available soon after the report is off the press, copies of which will be sent to the president and secretary of all State Leagues.

At a called meeting of the Board of Directors in Chicago on November 28, the Revisions Committee submitted a suggested form of Constitution and By-Laws for State Leagues, which was favorably acted upon. The Chairman of the Revisions Committee was authorized to have copies mimeographed as soon as possible and to send one copy to the president and secretary of each State League. A supply will be at Headquarters so that additional copies may be secured upon request. The Revisions Committee was further directed to draft a suggested Constitution and By-Laws for local Leagues. These, too, may be obtained from headquarters, when completed.

At the meeting of the Advisory Council in Detroit, the California State League declared that both its northern and southern branches had heartily endorsed the scheme for reorganization, as also did Indiana. The Illinois State League, at a meeting in December, accepted with much enthusiasm the new plan. The large number of inquiries which have come to Headquarters from officers of the various State Leagues, indicate the eagerness of the states in general to begin the work of reorganization. Certain conditions, inevitable in completing a huge task of this

kind, have made it impossible earlier to distribute the new National and State Constitutions and By-Laws. With the material available, the State Leagues can, through definitely appointed committees, begin the study of the new machinery, and gradually prepare for its operation. This will take time and patience, but once completed it should make for a more compact and far-reaching organization, both from the standpoint of the National and State Leagues.

As a further means for advancing and assisting in the work of reorganization, the Executive Secretary has been authorized by the Board of Directors to visit, upon request, as many states as possible, such visits to be dependent upon the resources available in the states to meet the expense and also upon the immediate demands upon the Executive Secretary at Headquarters.

NEW STATE LEAGUES OF NURSING EDUCATION

A State League of Nursing Education has recently been organized in Tennessee and Kansas. The officers elected in these new State League, are: Tennessee: President, Lena Lyons, of Memphis; secretary, Mrs. C. E. Ferree, of Chattanooga; Kansas: President, Ethel Hastings, of Kansas City; secretary, M. Helena Hailey, of Topeka.

Such new bodies, definitely planned for the purpose of study and research in nursing education, are indeed promising signs. They clearly indicate on the part of these states an interest and need recognized by the states themselves. The healthiest kind of development is that from within. Both Tennessee and Kansas are to be congratulated on their new organizations.

Copies of the Calendar for 1925,—Early Schools of Nursing in America—published by the National League of Nursing Education, are still available in any number desired. The price is \$1.00 per single copy, 75 cents per copy on all orders of 50 or over, delivered in one shipment. Send orders to Headquarters, National League of Nursing Education, 370 Seventh Avenue, New York City.

DEPARTMENT OF RED CROSS NURSING

CLARA D. NOYES, R.N., DEPARTMENT EDITOR
Director, Nursing Service, American Red Cross

THE DISABLED RED CROSS NURSE

ALL nurses are interested in the question of the disabled nurse. Though the American Red Cross is not primarily associated with assistance to individuals any more than is the case with the average School of Nursing Alumnae Association, there are certain benefits it has secured for its enrolled Red Cross nurses. A brief review is necessary to proper understanding. Those Red Cross nurses who, when serving with the Army and the Navy, suffered disability, became beneficiaries under Public Act 326, which by congressional authorization gave them medical care, hospitalization, compensation and, where necessary, vocational training.

For nurses in its own service overseas, the American Red Cross developed an elaborate accident and health insurance scheme which for what was termed "permanent disability" directly traceable to such service, allowed the payment of \$20 weekly for a total period of two years commencing four weeks from the date of the disability. During these four weeks, necessary medical care and attention were furnished free by the Red Cross. In regard to nurses in this country, assistance has been allowed in special cases as part of the war emergency for nurses. Here, too, they must first have fallen within the requirements for such assistance. Occasionally nurses who appear at first glance to be eligible for benefit, and whom the Red Cross would like to be able to assist, are found on full investigation of their cases

not to come within the eligibility clause. Those who have been helped to health and the ability to lead a normal life still keep in touch with National Headquarters which often receives letters from them. One of these is a nurse, still in frail health, who has established herself on a small farm in British Columbia.

Another nurse who contracted typhus in Poland, suffering disability as a result, received the two full years' insurance and an additional allowance. She settled on a homestead on one of the Californian deserts. What rehabilitation has meant to her is shown in the following extracts from a recent letter:

It is hard to teach an old dog new tricks and ranching takes lots of physical strength and a good deal of capital to begin besides experience. I should like to develop about five acres in alfalfa, shade trees, grapes, figs, flowers. It would take lots of water. I have the water but not the pumping facilities. Time will tell what I can accomplish. My shade trees are growing well but, of course, they were only started from cuttings a few inches long last spring. They are from three to four feet high now. They grow rapidly. I water them "by hand."

I am certain that I shall have to depend on outside earnings for a living. My homestead is a great source of satisfaction to me because it really belongs to me or will soon. I have grown well on it, and it is *mine*. Even though I leave it for a while to earn, I shall know I have a home.

Last month reference was made to the demand for nurses for Government Service arising from the influx of patients into Government institutions following the new legislation which permits any ex-service man, nurse, or other eligible women to receive treatment.

This month in relation to the question of the disabled nurse, the outlook of a nurse benefiting from this legislation is interesting. One Red Cross nurse who served at a naval base hospital overseas and contracted tuberculosis is now at a National Soldiers' Home in the middle west. For the benefit of those who, as she had, have a mistaken idea, her picture of life there may be reproduced:

I, for one, had altogether a wrong idea. . . . It was described as a camp where were hundreds of nurses who lived in cottages and raised chickens, ducks, and generally followed the open farm plan. So I was very much surprised when I arrived here to find that there was a large tuberculosis hospital accommodating about 400 or more patients, but only four other nurses besides myself. Now, we are ten in number—all ex-Service nurses and they have opened the upper floor of a building for us. It surely is a lovely change. We have nice rooms with big closets and sunny porches (southern exposure), home-like rest room with open fireplace where we can have a real log fire on chilly days, and in time, we are hoping to have our own dining room and kitchen. . . . We have a splendid medical staff here. I really think that Dr. ———, who is our M.D., is *exceptionally* fine for the work. All the duty nurses are graduates and our chief nurse is very capable and kind.

Other disabled Red Cross nurses have been assisted by various Chapters through the extension of their Home Service aid to civilians.

Then there is the provision which was made through the Bay Shore Convalescent Home. Now that this is to give place to a new home at Babylon, also a seaside resort on Great South Bay, Long Island, retrospection is appropriate. The new home, by the way, will be under the joint direction of the A. I. C. P., which has received a special bequest to be applied to the care of sick nurses, and

the New York County Chapter, through which all applications for admission are to be made.

Bay Shore, a lovely country estate of twelve acres on the southern shore of Long Island, was leased and opened mainly for the care of ex-Service nurses by the National Society in July, 1920. From then to April, 1923, it was maintained by appropriations made by the Central Committee, in which period approximately five hundred nurses benefited by staying there. Guest privileges were free but many nurses preferred to make some contribution to the cost of their visit. In April, 1923, the New York County Chapter assumed responsibility for its upkeep. As the ex-Service nurses decreased, other nurses who were broken in health were received. Its popularity never waned—at the end of August last year there was still a waiting list of nurses who wished to enter and from October, 1923, to October, 1924, 350 nurses enjoyed its hospitable resources. Bay Shore may be closed but tired Red Cross nurses who have won back joy of life on its broad lawns and among its beautiful evergreens and other trees, have fragrant memories. In thought, they can look again through the half-circle of the dining room's long leaded window panes to the majestic pine facing them; or browse once more among the many books in the well-stocked library; or sun themselves again on the wide porches; or dream dreams in the sunken garden. What a source of happiness it has been to many convalescents!

NURSING IN SOUTH AMERICA

Modern medical care and nursing attention are not yet widespread in South

America. Some idea of the uphill work in Peru, as well as an interesting account of hospital work, comes from Louisa Kurath, an American Red Cross nurse at the British American Hospital, Callao, which is operated under the auspices of the Methodist Episcopal Church Mission. The greatest difficulty is the language. It is apparently hard to find nurses, for instance, who speak Spanish and who are willing to go to Peru to a mission hospital. Apart from what is being done there, little other nursing is carried on among the Peruvians. At one time it was hoped to start a dispensary in Callao but the pressure of work at the hospital is now so great that the idea had to be discarded. Dispensary work at the hospital is heavy. There is much demand from all classes of patients to be taken in, as they like the care and interest displayed.

Miss Kurath herself is in charge of the training school for native girls attached to the hospital. She is attempting to give a course as close to the Standard Curriculum of the United States as she can. Women there, however, are not supposed to need more than a primary education so she finds student instruction more difficult under the circumstances. The only text book for nurses obtainable in Spanish is the Cuban translation of Maxwell-Pope. She says:

That is fine but not enough and it presupposes much more education than these girls have had. I must translate, for instance, chemistry, materia medica, bacteriology, nursing ethics, physiology, so I am kept pretty busy. This is our third year and I am hoping that my first students may be able to graduate this year. Our class year is from April to December. . . . I do hope some one will get interested in the nursing situation

sufficiently to translate more books into Spanish. It is quite a task to translate and make typewritten copies for the student. Although it is good practice in Spanish, I have gotten to the point where I can't spell English any more!

A MESSAGE FROM SERBIA

A delightful message from sixteen Serbian nurses comes to *confrères* in the United States. They wish to be remembered to all American nurses, to whom they promise to try to raise the standard of nursing in Serbia as high as it has been raised in this country. The message is contained in a letter to Miss Noyes from Caroline E. Robinson, an American Red Cross nurse now with the American Commission to Serbia, who sailed with Helen Scott Hay for France in December, 1918, and who in 1920 was chief nurse with the American Red Cross Commission for Albania. The nurses are members of the first class to graduate from the Belgrade Training School for Nurses after taking the recently inaugurated course in public health work, with which Miss Robinson is connected. As representative of the American Commission she presented the diplomas to them. They were dressed, by the way, in uniforms that were given to them by the American Red Cross from the surplus stock. It is hoped that this course will mean more applicants for the school, as many of the nurses like public health work and hitherto there has been a little difficulty about securing students. Miss Robinson continues:

The Ministry of Health is very much interested in the work. They have organized two school clinics and are about to open a third one. They are also organizing a great many health stations in Macedonia and

Dalmatia. Our health stations are being carried on by Serbian people and new ones are being organized in different villages, where the pupils of our Health Workers' School are working among the peasants. In the graduating class of the Training School, for instance, we have three pupils who had taken their course as Health Workers' with us.

Miss Newton, the English matron, left the school after the Commencement Exercises and Miss Hellich, a Serbian nurse, who took the international nursing course in London, has assumed charge of her work.

ENROLLMENT ANNULLED

Another list is issued this month giving the names of nurses whose Red Cross enrollment has been annulled for various reasons, after due investigation and consideration of the facts in the individual cases. Nurses whose enrollment is annulled are reminded that their appointment cards and badges must be returned to the Nursing Service at National Headquarters, as they always remain the property of the Red Cross:

Mrs. Rollin Burbank (*nee* Gertrude W. Bourne), Mrs. Winifred V. Cheever (*nee* Maynard), Hazel Luella Darrow, Mrs. Jasper T. Eaton (*nee* Margaret Doan), Mrs. Florence V. Ethier, Mittie Lou Fuller, Mrs. Anna M. Gleisten (*nee* Albert), Viola M. Humpert, Mrs. Margaret P. Ingraham, Mrs. Bertha Pearl Kibbe (*nee* Willey), Margaret McGurrin, Mrs. Signe L. Mackey, Beatrice E. Madden, Carolyn G. Maffey, Mary A. Maguire, Mrs. Anna Maria Maher (*nee* Day), Belinda M. Maher, Mrs. Bernadette Lillian Markley (*nee* Campbell), Maud Estelene Marlin, Frank Montgomery Marshall, Cecile Rae Martin, Margaret Mary Martin, Sarah Emma Martin, Mrs. Frances V. Mayes (*nee* Kelly), Edith Phoebe Mead, Mrs. Robert D. Meredith (*nee* Evelyn Cochrane), Alice May Metcalf, Edna M. Mitchell, Mabel Elliot Mizell (colored nurse), Henrietta M. Moehring, Christine Moen, W. E.

Moir, Catherine J. Moran, Anna Eva Morlock, Mary Helen Moyer, Mary Irene Moyer, Arpeny Thomas Mugerditchian, Sallie Marcelline Mulhearn, Mrs. Jack Mullaney (*nee* Opal Ruth Brackeen), Anna Mary Murphy, Anna Regena Murphy, Mrs. Charlotte G. Murphy (*nee* Schultze).

ITEMS

Superintendent Elizabet Boldt, of the German Red Cross Nursing Service, who spent six weeks in the United States on behalf of the Women's Church Committee on International Good Will and the mission of its Christmas "ship of friendship," called at National Headquarters in November just before returning to Germany. It was her second visit to America as she spent eighteen months here, before the war, studying nursing methods in the Presbyterian Hospital, New York, the Massachusetts General Hospital, Boston, and the Johns Hopkins Hospital, Baltimore. All Red Cross nurses will be interested in Miss Boldt's varied war experiences. One of the first detachments of fifty nurses sent to the Russian front, she later served under her Red Cross on the Polish, Hungarian, Serbian, Macedonian, Turkish-Arabian, French and Belgian fronts. In the interest of her work Miss Boldt traveled all over Germany, recent activities taking her into the Ruhr district and the Rhineland.

Elinor Lee Beebe, Division of Child Hygiene, Kansas State Board of Health, has accepted the position of Special Assistant to the National Director of Instruction in Home Hygiene and Care of the Sick, National Headquarters. A graduate of Fairmount College, Wichita, Kansas, an A.B., a graduate nurse of the Massachusetts General Hospital Training School, with postgraduate work both at Simmons College, Boston, and Columbia University, New York, to her credit as well as thorough experience in high school teaching, Miss Beebe was selected Instructor of the Summer Session Course in Home Hygiene at Colorado Agricultural College this past summer.

JOURNALS WANTED

Mrs. Agnes M. Williston, Superintendent of the School of Nursing, Changchow General Hospital, Changchow Ku, China, would like the issues of the *Journal* for 1924 for her nurses.

STUDENT NURSES' PAGE

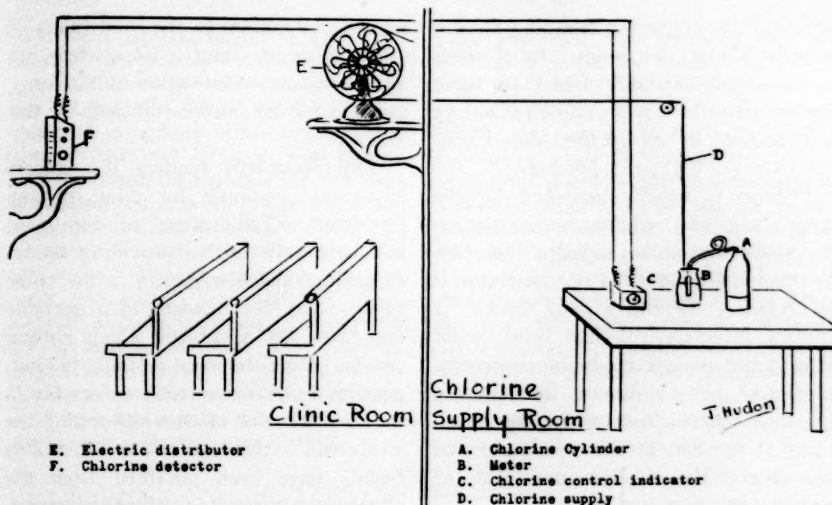
A ONE-HOUR CURE FOR COLDS

BY ETHEL ROOF AND JULIANA HUDON
Battle Creek College, Battle Creek, Michigan

ONE of the most common ailments, from which the human family suffers, is a cold. The seriousness of a cold is not often contemplated. Common colds are the cause of much suffering and disability. The statistical bulletin of the Metropolitan Life Insurance Company of November, 1923, states that in a group of 6,700 employees, colds occurred at a rate of 420.7 per thousand for the year with the loss of 5,233 days. The American Review of Reviews for September, 1924, says, "At least forty-two persons out of every hundred suffer from colds every year. One of the first symptoms of many contagious diseases is a cold. Hence the problem of curing a cold, or rather of aborting a cold before it plays havoc with the body, is worthy of much consideration. The chlorine treatment is perhaps the most recent method which is being used to solve this problem.

The results of experiments tried during the recent World War have shown that chlorin may be used either as a dangerous gas or as a harmless remedy, depending upon the degree of concentration in which the gas is used. Kuster states that in 1915 inhalations of chlorin were used successfully to clear up meningococcus and diphtheria carriers. During the influenza epidemic, Hale used chlorin in unknown concentration at the University of Arkansas and believed that students who took this treatment suffered less from influenza than others. Employees in plants producing or using chlorin have always believed

themselves relatively free from respiratory diseases. During the war when the chlorin plant at Edgewood Arsenal was producing to full capacity, the influenza epidemic struck the post and the hospital was filled to overflowing. It is stated that no cases were recorded among the operatives of the chlorin plant although every other organization on the arsenal had its full quota of cases. Recent experiments show that certain kinds of bacteria are killed by a concentration of 0.021 mg. of chlorin per liter, if the time of exposure is sufficient and also that the more delicate organisms such as the meningococcus and *M. Catarrhalis* are killed after an hour's exposure to this concentration. It is believed that the organisms causing the common cold and influenza belong to the group of so called filtrable diseases and that they may be even more susceptible to the action of chlorin than are ordinary bacteria. A concentration of 0.021 mg. per liter kills bacteria and is well within the limit of safety. It would require approximately one hundred times the strength of the chlorin used before there would be danger in breathing the gas. Experiments showed that one hour exposures appear sufficient to sterilize the tonsillar, postnasal and pharyngeal surfaces. However, chlorin would probably have little or no penetrating power and could hardly be expected to sterilize tonsillar crypts or other deep seated infections. A concentration of 0.015 mg. is used with very good results and it is found that a



concentration of 0.02 causes a slight irritation of the throat.

It seems very probable that such chlorin treatment will completely abort a cold when taken sufficiently early and even in well developed cases it affords great relief. Acute bronchitis is practically always relieved. There is more difficulty in treating head cold because the swelling of the mucous membranes stops the air passages and prevents free access to the chlorin. However, experiments with epinephrin (a drug which shrinks swollen and catarrhous membranes) will determine whether this class of colds may also be cured.

Austin O'Malley, M.D., of Philadelphia, states that two desperate phthisical patients were relieved without being submitted to any medical treatment, but they resided at a bleaching establishment near St. Denis, where atmosphere is impregnated with chlorin. A similar atmosphere was created in the rooms of some young phthisical patients in the Royal School at St. Denis. This

medication, although it did not cure these patients, ameliorated their condition, diminished their dyspnea, promoted sleep, gave them appetite and destroyed the fetor of their sputa.

There are certain groups of patients who are not benefited by the chlorin treatment. Patients with sinus disease derive no benefit. Others find the nose stopped up and choke after taking the treatment. Most of these are patients who have had asthma.

The Wallace and Tierman Company in New York has produced a very simple portable apparatus by means of which measured quantities of chlorin may be released. The small cylinder contains liquid chlorin. When the valve at the top is opened, chlorin escapes and passes through a rubber tube to a glass cylinder filled with salt solution, and by means of the very simple siphon, is discharged into the atmosphere in pulsations, each pulsation containing 30 c.c. of chlorin gas. An electric fan is set on the table beside the orifice in

order to distribute the escaping chlorin equally about the room. In a room containing 1,000 cubic feet, 146 cubic centimeters of chlorin or five pulsations are required to set up the desired concentration of 0.015 mg. per liter.

Chlorin is rapidly absorbed by the walls, and the original concentration decreases more or less rapidly. In order to maintain the desired concentration it is necessary to release more chlorin at certain intervals. It has been found that in the average room the concentration may be maintained by releasing one-half the original number of pulsations at the end of thirty minutes and one-quarter the original number at the end of forty-five minutes.

The concentration of chlorin in the ordinary room cannot be maintained with accuracy, and therefore the precise air concentration is relatively unimportant. The important factor is that a sufficient amount of chlorin should be inhaled over a sufficient length of time to produce a concentration of at least

one to one million in the fluid lining of the respiratory tract. Experience has shown that a concentration of 0.015 mg. per liter for one hour is sufficient for this purpose.

This apparatus renders the chlorin treatment available for trial by any physician. Tedium of treatment has been relieved by providing books, magazines and newspapers in the clinic room. The development of a portable apparatus by means of which chlorin can be administered to a single patient, permits a patient to rest comfortably in his own home or office while taking the treatment. Although many favorable results have been obtained from the chlorin treatment it is still in the experimental stage. The duration of an adequate treatment, the concentration of the gas to be used, the methods by which the gas is to be produced and similar factors are still the subject of experimentation. Further experimentation alone will prove the efficacy of this treatment in ridding us of the cold menace.

CHLORIN IN RESPIRATORY DISEASES¹

When the announcement first appeared in *The Journal* last March that Vedder and Sawyer of the Army Medical Corps had been able to devise a method for administering chlorin, in the treatment of respiratory diseases, which seemed to have a distinctly beneficial effect in this class of ailments, it was received with exceptional interest. This interest was stimulated, no doubt, by the fact that high officials of our government, including even the President of the United States, had submitted to treatment by this method and had expressed satisfaction with the results. Immediately, individual physicians, as well as hospitals and health depart-

ments, undertook to test chlorin administration on a large scale, with a view to establishing finally its actual adequacy. In New York City, Health Commissioner Monaghan established two clinics under the direction of Dr. L. I. Harris, in charge of the Bureau of Preventable Diseases. These clinics began active work, June 1, and continued until August 1. The results of the experiment have just been made available through the health bulletin of the Department of Health of the City of New York. According to the report, only 6.5 per cent. of 605 persons with various respiratory diseases reported themselves as cured, in contrast to 71.4 per cent., of 931 patients reported cured in the original paper of Doctors Vedder and Sawyer. Fifty-three per cent. of the patients treated by the New

¹ From the *Journal of the American Medical Association*, Dec. 6, 1924.

York clinics reported improvement, but the physicians in charge do not attach much importance to such reports, since it is well known that patients with minor respiratory infections tend to improve, within certain limitations, by the very nature of such diseases. As is mentioned, the report of the New York investigators concerns only acute cases, and the conclusion is that in such instances at least the claims are unjustified. Much has been said of the use of the method in whooping cough, but eighteen cases of this disease studied with twelve controls failed to show any appreciable advantage of the chlorin method of treatment over that previously used. The method was without apparent benefit in asthma and hay-fever; indeed, three patients with asthma became decidedly worse

under treatment. The results of this controlled investigation are, therefore, such as to deprecate definitely the claims originally made for the method by the Army medical investigators. The physician is confronted with a situation in which the original investigators, whose work seems to have been conducted in a scientific manner, report excellent results, while other investigators working independently have failed to confirm. Obviously, the results of numerous investigations being made elsewhere must also be brought to light before any opinion is warranted as to the future of this method of treating disease. Certainly the individual physician who purchases such apparatus and uses it in his practice must do so with the distinct understanding that he is using an unestablished method.

OUR CONTRIBUTORS

The editorial, January, 1925, was prepared for *The Journal* by M. Adelaide Nutting, R.N., M.A., the beloved Dean of American nurses.

E. S. Gilmore who, as President of the American Hospital Association, is advocating university courses for the preparation of hospital administrators, has set forth for us some of his views on the education of nurses in the editorial, Let Us Get Together. Mr. Gilmore is the able director of Wesley Memorial Hospital, Chicago.

The illustrations for the editorial At Five O'Clock on Christmas Morning in the December *Journal* were made by Mrs. Vera Allender Schweiger, R.N., Army School of Nursing, '21.

The writer of the article, Influences Which Quicken or Stimulate, is a well-loved nurse, but in this connection she prefers to remain anonymous.

J. Lisle Williams, M.D., is pathologist at the Evanston Hospital, Evanston, Ill., and is clinical assistant in medicine at Rush Medical College, Chicago.

Louie Croft Boyd, A.B., R.N., is a graduate of the Colorado Training School for Nurses of Denver and of the University of New Mexico. She has served her school most faithfully, having organized and reorganized the class and lecture work under several administrations. She was the first Secretary of the Colorado State Board of Nurse Examiners and wrote a book, now out of print, "State Registration for Nurses."

Effie J. Taylor, R.N., is well known to *Journal* readers. She is now Associate Professor of Nursing in the Yale School and Superintendent of Nurses in the New Haven Hospital.

Elizabeth M. Focht, R.N., has had postgraduate work in the care of children. She is a private duty nurse "and going strong."

Everdean Harmeling, R.N., is one of four nurses carrying on the extremely interesting work described in Nursing in the Kentucky Mountains. The Mary Isabelle Allen Hospital works in cooperation with state-wide clinics. Miss Harmeling is a graduate of the Presbyterian Hospital School of Nursing, Chicago, and had one year of experience with the Visiting Nurse Association in the same city.

Wanda M. Caswell is Social Director at the Bellevue School for Nurses, New York City. Years of experience in personnel work as well as social work, both here and abroad, preëminently fit Miss Caswell to discuss the best disposition of the student nurse's leisure hours. As an overseas war worker and later as a reconstruction worker, Miss Caswell has gained a fund of knowledge and experience which has been invaluable.

Mary Brooks Eyre, R.N., is a graduate of St. Luke's School of Nursing, Denver, Colorado. She was a member of the Colorado Board of Nurse Examiners for fifteen years, serving both as President and as Secretary. She was Superintendent of the schools of nursing at St. Luke's, Denver, and Minnequa, Pueblo. She has recently served as Assistant Inspector of nursing schools for the California State Board of Health. She received both the Bachelor's and the Master of Arts degree at Stanford University. She is now Assistant Professor of Psychology at Pomona College, Claremont, California. She is the author of Psychology and Mental Hygiene for Nurses.

Alice M. Olson, R.N., graduated from the Massachusetts Homeopathic Hospital, Boston, with the class of 1915, and has since done private bedside nursing.

LETTERS TO THE EDITOR

The editors are not responsible for opinions expressed in this department. Letters should not exceed 250 words and should be accompanied by the name and address of the writer.

THE POLYCLINIC SCHOOL FOR NURSES, ATHENS

DEAR EDITOR: I suppose you have heard something of the girls we are trying to train to become nurses,—of the troubles and sadness through which they have come, of their deportation and long, hard marches over the mountains, hungry and miserable, after their fathers had been killed before their eyes, or dragged away and never seen again; of their big brothers who were also taken away, so there were just women and small children left for the journey; of how these women and little ones were often left by the roadside in the morning, too weak to continue on their way, and how at last a small remnant of the group that started from their village was allowed to rest in some other poor town, and that here the girls found refuge in the American orphanages, and were cared for until they were allowed to leave Anatolia in the "exchange of minorities." These are the girls who still have ambition enough to try to take up the profession of nursing. And although they have little education, as we think of the word, their experiences have made them old beyond their years, and almost without exception, they love to study. There are many hopeful things about the situation, as well as some that are rather trying, and since the need of nurses in Greece is so urgent, it is certainly worth the trial. A woman does not amount to much in the East, and for man to stretch his imagination enough to realize that she is a being with a mind of her own, and so able to take responsibility, is almost impossible. If we can "show" that we can produce such a type, we shall have gained a great victory. But the girls have never been allowed to think for themselves, or to make and fulfill any plans, so there is a long way to go. However, I feel we are on the right path, and if we can teach them to work helpfully and intelligently with the physicians of this country; having right standards, and being truthful, honest and womanly, we shall

have done something towards raising the standards of nursing, over here.

Greece HELEN GERTRUDE CHURCHILL.

GRADUATE NURSES' INSTITUTE, UNIVERSITY OF WASHINGTON

DEAR EDITOR: The graduate nurses' institute which was conducted at the University of Washington this summer seemed to justify the expectations of the committee which had worked on it for such a long time. It had been hoped that a short intensive course of this nature would serve a three-fold purpose: as an educational inspiration, as permitting a large group of nurses in different fields to get together and yet to combine enough relaxation and pleasure with the work to make the whole program enjoyable. Arrangements for the Institute were made by the University Extension Service, acting with a committee composed of a representative from each of the three State Nurses' Association, the King County Graduate Nurses' Association, and from the University. One hundred and twenty nurses attended the lectures. Those came largely from the State of Washington, but Kansas, Montana, California, Oregon and British Columbia were represented. The committee was most fortunate in obtaining as a faculty for the Institute lecturers who had much to give. They were women of national reputation, yet who were not only in entirely different fields of work, but were themselves so individualistic that the varied points of view were most stimulating. The faculty were: Edna L. Foley, Superintendent of the Chicago Visiting Nurse Association who lectured on Public Health; Carol L. Martin, Instructor of Nurses in the Presbyterian Hospital of Chicago, who lectured on the educational side of nursing; Elnora Thomson, of San Francisco, Western Representative of the American Child Health Association who lectured on Mental Hygiene; Martha Koehne of the Home Economics Department of the

University, who talked on Nutrition; and Dr. Howard Woolston, also of the University, who lectured on Sociology. The recreational side was by no means forgotten. Monday evening a dinner was given, which was attended by one hundred and thirty nurses which proved to be a real jollification and get-together affair. On Friday afternoon, a boat trip was arranged, starting from the University dock and going through Lake Washington, Lake Union, the Government Locks and out into the Sound, returning to the University. Supper was served on board. This trip provided just the relaxation that was needed, and ended the week happily. Daily lunches were served to the group in the banquet room at the Commons. This plan not only provided good food but offered an additional opportunity for a social hour. Viewing it from every angle, the Institute was indeed a success and judging by

the expressions of those attending, it is hoped that it may be repeated.

EDITH S. SOULE,

Director, Department of Nursing.

University of Washington,
Seattle

JOURNALS WANTED

Minnie Schultz, University Hospital, Iowa City, Iowa, wishes to obtain the Journals listed here: 1900, October-December; all of 1901 through 1904; 1905, all except September; all of 1906-1908; 1909, all except September, November, December; 1910, February through April and June; 1911, all except January; 1912, all except February, August, November; 1913, all except April, June, September, December; 1914, January and April; 1915, January, August, September; 1918, March through July, and December; 1919, January through April, June, August, December.

A MEDICAL CENTER FOR NEW YORK CITY

The alumnae and student nurses and friends of the School of Nursing of the Presbyterian Hospital in the City of New York have set out to raise \$1,000,000 for the new building of the School of Nursing. This building will be included in the Medical Center which will be erected and equipped jointly by the Presbyterian Hospital and the College of Physicians and Surgeons of Columbia University. A site of twenty acres on upper Broadway between 165th and 168th Streets has been generously donated for this great enterprise.

The campaign by the alumnae will be inaugurated on February 1st. All graduates of the School of Nursing regardless of their place of residence will be given the opportunity to cooperate and each will undoubtedly work toward a definite individual share. A special organization among the four hundred nurse alumnae residing in the vicinity in greater New York will be effected and it is planned for them to summon to their assistance the host of friends which the School of Nursing has accumulated through its long years of recognized service to the community.

An Executive Committee composed of representatives of the Alumnae body and of the present School of Nursing has been formed, with Anna C. Maxwell, founder and for thirty years director of the School of Nursing, as Honorary Chairman. The Honorary Vice Chairman is Mrs. C. Irving Fisher (Margaret A. Bewley), widow of the late Dr. C. Irving Fisher, for so many years Superintendent of the Presbyterian Hospital.

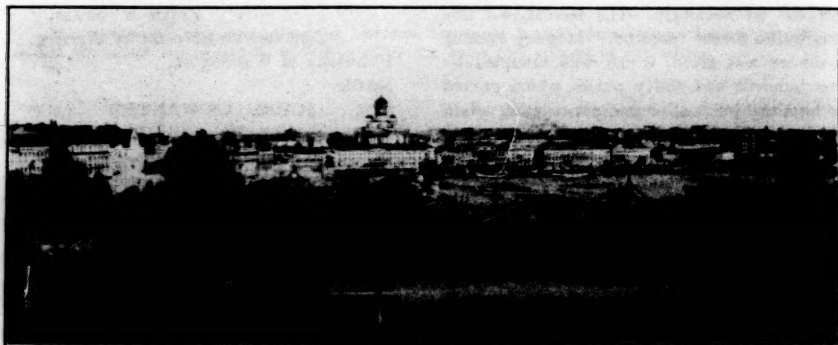
The joint building of the Presbyterian Hospital and the Medical School of Columbia University will be the nucleus of a great medical center for New York City, similar to those of Johns Hopkins, the Mayo Clinic, in Rochester, Minnesota, of Harvard and of other universities. The joint building will cost \$10,000,000, of which \$7,000,000 will be devoted to the new Presbyterian Hospital building and \$3,000,000 to the Medical School. The managers and friends of the Presbyterian Hospital are now engaged in the preliminary work of raising the \$4,500,000 needed to complete the Building Fund of \$7,000,000 and it is toward \$1,000,000 of this amount, which has been designated for the new School of Nursing, that the Alumnae are striving.

It is planned eventually to include in the Medical Center the New York Psychiatric Institute and Hospital, together with other institutions such as a children's, maternity, neurologic, urologic, eye, ear, nose and throat hospital, besides a dental school and a school for training social and public health workers. The School of Nursing will retain its identity and will be merged into the work of the Center only in so far as economic and educational benefits can be derived from the affiliation.

TOO LATE FOR CLASSIFICATION

Delaware: The annual meeting of the Delaware State Association will be held on January 22, at 7 p. m., in the Hotel du Pont Club Room.

NURSING NEWS AND ANNOUNCEMENTS



HELSINGFORS SEEN FROM THE OBSERVATORY MOUNTAIN

THE TRIP TO HELSINGFORS, FINLAND, JULY 20 TO 25, 1925

As approximately only 200 nurses have signified their interest in the trip to Helsingfors, up to date, it will not be possible to secure a steamer to sail *direct* to Helsingfors. The Cunard Steamship Company, however, is reserving accommodations for this number—200—on the *S. S. Caronia* scheduled to sail from New York on July 8, 1925. The *Caronia* is a fine 20,000 ton ship and makes the crossing in about 7½ days to Liverpool.

The arrangements from Liverpool on to Helsingfors are now being made, and the Transportation Committee will work in co-operation with the Cunard Steamship Company in order that the arrangements for the departure, the journey across England, and across the North Sea may be as comfortable as possible.

The fare one way, from New York to Helsingfors, including all meals and sleeping accommodations will be approximately \$175 plus \$5 United States Government Tax. An extra \$10 will assure the better accommodation on the *Caronia*.

We assume that everyone attending the Congress from the United States will wish to avail herself of this opportunity of visiting some of the other European countries. With this in mind, Messrs. Thos. Cook & Sons has been asked to cooperate with the steamship company and is at present preparing a booklet

suggesting a number of suitable tours of varying duration and prices, from which it is anticipated everybody will be able to find one to suit. The same company is also compiling all the information necessary for travelers in Europe. Information as to the requisite deposit and final payment for tickets will be given at a later date. Those contemplating the journey will greatly assist the Transportation Committee by prompt response to letters and instructions, as the smooth working of the arrangements must necessarily depend on exact knowledge of the number of passengers. This applies to members of families or friends who may plan to accompany nurses, also. There will be a registration fee of \$1.25 at the place of meeting at Helsingfors.

The Committee suggests that as far as possible arrangements be made for two people to share a room while in Helsingfors. Cards for making hotel reservations will be provided by the Committee and should be filled in and mailed as soon as possible, not later than April 1, 1925, to:

Committee on Arrangements,
Kirurgiska Sjukhurst,
Helsingfors, Finland.

No accommodations can be guaranteed after that date.

It is estimated that the total expense of the round trip including accommodation and meals

for five days in Helsingfors will be about \$420, but this, of course, would not cover a tour in any other country.

Do not send any communications to the Cunard Steamship Company.

Do not communicate with Thos. Cook & Son until instructed by the Transportation Committee to do so.

Transportation Committee: Florence M. Johnson, Chairman; Theresa Kraker, Blanche Pfefferkorn, Christiane Reimann, Agnes G. Deans, Secretary.

SUGGESTIONS IN REGARD TO HOTEL ACCOMMODATIONS IN NEW YORK PRIOR TO SAILING

On December 4, a representative of the Hotels Earle and Holley called at National Nursing Headquarters and submitted the following information:

"The Hotel Holley was the mobilization station of the U. S. Army nurses prior to their sailing abroad during the World War, and all of the Knott hotels took care of the different units while waiting for sailing orders, so I feel that the majority of nurses in the U. S. are well acquainted with our accommodations and will be most satisfied with the rates which we quote. We can offer both the American and European plan, and over seven-eighths of the rooms in our hotel are with bath. On the American plan, two persons to a room, the rates are \$4 per person, and for single rooms, \$5. On the European plan, the rate is \$4 for a double room (two persons) and \$3 for a single."

Anyone who wishes to take advantage of such an offer at the time of arrival in New York, should write directly to: Benjamin Collado, care The Knott Hotels, 42 East 11th Street, New York, N. Y.

Mr. Collado states that he will take charge personally of the reservations that are received and see that every one is comfortably taken care of.

If nurses arrive in groups, he will arrange to meet them with busses at the rate of 25 cents per person, including hand baggage, and take them to the hotel; on the day of sailing, he would make the same arrangement for them to be taken to the boat.

REPORT OF COMMITTEE ON FEDERAL LEGISLATION

Since the last report to the *Journal* and with the opening of the fall work in Washington, your representative has attended a meeting of the Child Labor Committee for the purpose of making plans for the ratification of the Child Labor Amendment. A conference has been held in regard to the Educational Bill, which was very interesting, but which was purely for a discussion of the best method of procedure and could not be considered as a committee meeting. The first meeting of the Joint Congressional Committee was held on December 8, and will be the subject of the next report. There has been as yet no meeting of the Reclassification Committee, but it is not believed that the decision of the Personnel Board in regard to the status of nurses will be altered by the passage of this bill and the placing of responsibility for classification under the Civil Service Commission.

LUCY MINNIGERODE, *Chairman.*

REPORT OF COMMITTEE ON JANE A. DELANO MEMORIAL

The Chairman of the Delano Memorial Fund went to New York the end of November for the purpose of discussing the Memorial with Mrs. Whitney and for conference with the members in New York in regard to the contract with Mrs. Whitney. A rough draft of the contract has been made, which will be considered. It was also proposed to prepare a bill for introduction into Congress in order to obtain permission to place this Memorial on the desired site opposite the Red Cross building. It will then be necessary for the design of the Memorial to be submitted to the Fine Arts Commission for approval.

As soon as the Memorial is in proper shape good photographs will be taken, not only of the whole, but separate photographs of the panels, which it is expected will depict first, the training of the student; second, private duty nursing; third, public health nursing, and fourth, war service. These photographs will be paid for out of the fund and sold at a moderate cost; it is hoped that training schools, individual nurses and nursing organizations will secure copies of these photographs.

LUCY MINNIGERODE, *Chairman.*

NURSES' RELIEF FUND

REPORT FOR NOVEMBER, 1924

Balance on hand, October 31, 1924, \$14,323.40

Interest on bonds ----- 503.68

Receipts

California: Dist. 1, \$17; Dist. 5,
\$18; Dist. 9, \$47; Dist. 10, \$15;
Dist. 11, \$20.50; Dist. 13, \$11;
Dist. 16, \$5 ----- 133.50

Connecticut: Visiting Nurses'
Assn., Waterbury ----- 15.00

Florida: Dist. 4, Gordon Keller
Hosp. Alumnae, Tampa ----- 3.00

Georgia: Third Dist. Assn., \$10;
individuals, \$9; Georgia Baptist
Hosp. Training School for Nurses,
Atlanta, \$10 ----- 29.00

Hawaii: Nurses Association of
Territory of Hawaii ----- 10.00

Illinois: State Association of
Graduate Nurses, \$348.33;
Anonymous, \$10 ----- 358.33

Iowa: Dist. 5, \$5.50; Dist. 10,
\$14 ----- 19.50

Kansas: State Nurses' Association 10.00

Maine: State Nurses' Assn., \$25;
Eastern District Nurses' Asso-
ciation, \$60; Members of West-
ern Dist., \$14; Members Maine
General Hosp. Alumnae, \$20 ----- 119.00

Maryland: Maryland Homeopathic
Hosp. Alum., \$10; Maryland
General Hosp. Alum., Balti-
more, \$32.50 ----- 42.50

Massachusetts: Boston State Hosp.
Alum. Assn., \$10; individuals, \$5 15.00

Missouri: Missouri Baptist Sani-
tarium Alum., St. Louis, \$43;
6 members Second Dist. (Kansas
City), \$6; 2 members First Dist.,
\$2 ----- 51.00

Montana: Dist. 2 Graduate
Nurses' Assn. ----- 27.00

Nebraska: Dist. 3 ----- 19.00

New York: Cortland Alum. Assn.,
\$12; one individual, Cristobal,
Canal Zone, \$1; Dist. 3, Arnot
Ogden Memorial Hosp. Alum.
Assn., \$25; Dist. 4, Syracuse
Memorial Hosp. Alum. Assn.,
\$100; Dist. 7, Homeopathic Hosp.

Alum. Assn., Utica, \$2; Coopers-
town Hosp. Alum. Assn., \$10;
Dist. 13, Manhattan and Bronx,
\$10; six individuals, \$66; special
donations, \$39; New York Hosp.
Nurses' Alum. Assn., \$50; Mrs.
Geo. E. Marcus (3rd Liberty
Loan Bd), \$50; 2 coupons from
above bond, \$2.13; Dist. 14, Stu-
dent Nurses Swedish Hosp.,
Bklyn., \$10; Methodist Episco-
pal Hosp. Alum. Assn., \$50 ----- 427.13

Ohio: Dist. 1 ----- 39.00

Oklahoma: State Nurses' Assn.,
\$30; Oklahoma M. E. Hosp.
Alum. Assn., \$14; Dist. 1, \$3;
Dist. 2, \$7; Tulsa, \$15; Shawnee,
\$4 ----- 73.00

Texas: Dist. 1, El Paso, \$42;
Dist. 6, \$1 ----- 43.00

Washington: Dist. 1, Bellingham 40.00

West Virginia: State Nurses'
Assn ----- 200.00

Wisconsin: Milwaukee State Hosp.
Alum. Assn., \$50; St. Joseph's
Hosp. Alum. Assn., Milwaukee,
\$25 ----- 75.00

Gift, Estate of Suda P. Deaver.. 167.82

Total receipts ----- \$16,743.86

Disbursements

Paid to 57 applicants.... \$848.10

Exchange on checks ---- .20

Total disbursements ----- 848.30

Balance on hand, November 29,
1924 ----- \$15,895.56

Invested funds ----- 81,566.14

----- \$97,461.70

Note.—From the estate of Suda P. Deaver,
a member of the American Nurses' Associa-
tion living in Ohio, it will be noted that a
contribution of \$167.82 was received. This
amount was provided for in Miss Deaver's
will.

A \$50 Third Liberty Loan Bond was re-
ceived from Mrs. George E. Marcus, a friend
of the nurses, through the New York State
Committee.

In the report of the Relief Fund for August, 1924, in which it appears that the Maine General Hospital contributed \$25, the Alumnae Association has requested us to state that the contribution was from the "Alumnae Association of the Maine General Hospital Training School for Nurses."

All contributions for the Relief Fund should be payable to Nurses' Relief Fund and sent to the State Chairman; she in turn will mail the checks to the American Nurses' Association, 370 Seventh Avenue, New York, N. Y. If address of the Chairman of the State Committee on the Relief Fund is not known, then mail checks to the Headquarters office of the American Nurses' Association, 370 Seventh Avenue, New York. Requests for leaflets should be sent to the Secretary at the same address. For application blanks for beneficiaries and other information, address Elizabeth E. Golding, Chairman, 317 West 45th Street, New York, N. Y.

THE ISABEL HAMPTON ROBB MEMORIAL FUND

REPORT TO DECEMBER 8, 1924

Previously acknowledged	\$29,061.84
Iowa: State Assn., \$25; Dist. 6, Jane Lamb Memorial Hosp., Clinton, \$5; Mercy Hosp., Clin- ton, \$15; Mercy Hospital, Dav- enport, \$9.75; St. Luke's Hosp., Davenport, \$5; individual 25c....	60.00
Kentucky: Alumnae of Methodist Episcopal Deaconess H o s p., Louisville	5.00
Minnesota: State Nurses' Assn....	50.00
Pennsylvania: Dist. 8	5.00

Total \$29,181.84

MARY M. RIDDLE, *Treasurer*.

Scholarships are granted from this fund, on a competitive basis, once a year in the spring. Application blanks may be obtained from the Secretary, Katharine DeWitt, 19 West Main Street, Rochester, N. Y.

THE McISAAC LOAN FUND

REPORT TO DECEMBER 8, 1924

Balance, November 10, 1924.....	\$148.84
Iowa: State Nurses' Assn.....	25.00

Minnesota: State Nurses' Assn.....	50.00
Pennsylvania: Dist. 8, Graduate Nurses' Assn.	5.00

\$228.84

MARY M. RIDDLE, *Treasurer*.

Checks to the two funds should be made out separately payable to Mary M. Riddle, Treasurer, and sent to her in care of *The American Journal of Nursing*, 19 West Main Street, Rochester, N. Y.

ARMY NURSE CORPS

During the month of November, 1924, the following named members of the Army Nurse Corps were transferred to the stations indicated: To Territory of Hawaii, 2nd Lieut. Bessie I. Kellogg; to Walter Reed General Hospital, Washington, D. C., 2nd Lieuts. Mary Strawinski, Anne Coghlan; to Letterman General Hospital, San Francisco, Cal., 2nd Lieuts. Annie O. Baird, Lulu J. Newton, Elizabeth Kenny, Beatrice Colburn, Josephine V. Bruen, Winifred I. Peterson; to Fort Benning, Ga., 2nd Lieut. Frances E. Thomas; to Philippine Department, Kathryn R. Edwards, 2nd Lieut.; to Station Hospital, Fort Sam Houston, Tex., 2nd Lieuts., Margaret McCarthy, Madeline Holderer; to Letterman General Hospital, Cal., 1st Lieut. Clara Belle White; to Station Hospital, Fort Sill, Oklahoma, 1st Lieut. Elizabeth Harding; to Army Supply Base, Brooklyn, 1st Lieut. Sophy M. Burns.

The following named members are under orders for separation from the Corps: 2nd Lieuts. Jean Scott, Marguerite M. Fischer, Beatrice Terry, Violet L. Smith, Marie Eickhoff, Mary I. Shirley, Adelaide E. Castelin, Dorothy Weed.

Della J. Hurley and Maude C. Davison, 2nd Lieuts., promoted to grade of Chief Nurse, 1st Lieuts., Army Nurse Corps.

JULIA C. STIMSON,

Major, Superintendent, Army Nurse Corps.

NAVY NURSE CORPS

During the month of November the following nurses were transferred: To Annapolis, Md., Grace Sanner; to Great Lakes, Ill., Mary V. Ennis; to League Island, Pa., Susie I. Fitzgerald, Chief Nurse; Margaret J. Hickey, Anna F. Patten; to Portsmouth, Va., Isabel F. Ly-

day, Reserve Nurse; to St. Thomas, V. I., Ethel R. Parsons.

Honorable Discharge: Sophia V. Kiel, Chief Nurse, U.S.N., Carolyn C. Jensen, U. S.N., and Elizabeth H. Cooke, Alice E. McGuire, Zilla Sprunger, Reserve Nurses.

Resignations: Dorothy E. Lynn and Helena R. Callahan, Cora F. Rockwell, Helen Mae Trott, Reserve Nurses, U. S. N.

J. BEATRICE BOWMAN,
Superintendent, Navy Nurse Corps.

U. S. PUBLIC HEALTH SERVICE NURSE CORPS

REPORT FOR NOVEMBER, 1924

Transfers: To San Francisco, Calif., Rossella McDonough, Hilder Steinburg; to Chicago, Elizabeth Tierney; to Ft. Stanton, N. M., Anna O'Brien; to Stapleton, N. Y., Jessie MacFarlane, Louise Kuhrtz; to Boston, Mass., Eva Bowman.

Reinstatements: Gaynelle Finks, Anna K. Pilegard and Margaret G. Kelly.

LUCY MINNIGERODE,
Supt. of Nurses, U.S.P.H.S.

UNITED STATES VETERANS' BUREAU REPORT FOR NOVEMBER

HOSPITAL SERVICE, Transfers: To Camp Kearney, Cal., Edna M. Hill; to Ft. Bayard, N. M., Ethel S. Pavlovich, Clara Brunelle, H.N., Mildred L. Jones; to Tucson, Ariz., Mary Graham, H.N.; to Excelsior Springs, Mo., Rose Waller, Marion L. Humphrey; to Washington, D. C., Anna R. O'Donnell; to Walla Walla, Wash., Olive B. Sweet, C.N.; to Dawson Springs, Ky., Ada E. Bond; to Chillicothe, O., Mary V. Huddleston, Alma Vigoren, Myra C. Hartley; to Camp Custer, Mich., Amanda Honert, H.N., Mary G. Curran, H.N.; to Northampton, Mass., Anna Herd, H.N.; to Rutland, Mass., Sarah I. Musgrove; to Bronx, N. Y., Rachel Goldgar; to Castle Point, N. Y., Nona Cuning; to Lake City, Fla., Odessa M. Sheppard, H.N.; to Algiers, La., Amelia Cherry, H.N.; to Maywood, Ill., Dorothy Livingstone; to Minneapolis, Flora Schumacher.

Reinstatements: Annie G. Pugh, Mamie Johnston, Elise Schefer, Beatrice Firebaugh, Ingeborg H. Von Blucher, Mary W. Davis,

Frances E. Gross, Florence E. Robinson, Nora F. McMahon, Marion S. Hodgdon, Mamie Shepherd, Laura A. Sweeney, Mary G. Moore, Mazie Forant, Zilpha Head.

DISTRICT MEDICAL SERVICE, Transfers: Rachel Goldgar to Bronx, N. Y.; Dorothy Livingstone, to Maywood, Ill.

It is expected that the new U. S. Veterans' Hospital No. 102, Livermore, California, will be opened for the reception of patients in the near future. Nurses with special training in tuberculosis nursing will be needed to staff this hospital.

PROGRESSIVE STEP TAKEN BY THE U. S. VETERANS' BUREAU TO IMPROVE ITS NURSING SERVICE

The Director of the U. S. Veterans' Bureau has approved the recommendation of the Medical Director to establish an Advisory Committee of Nurses to act in the capacity of Advisors to the Medical Director and the Medical Council. Eight nurses, national leaders in nursing, social service, and public health nursing have been designated members of this committee.

The function of this committee is to advise the Medical Director, the Medical Council, and its committees, on the above mentioned subjects, with the object of improving the nursing service to our disabled veterans. The following nurses have been invited to serve on this committee: Adda Eldredge, President American Nurses' Association; Laura R. Logan, President National League of Nursing Education; Clara D. Noyes, Director Nursing Service, American Red Cross; Major Julia C. Stimson, Superintendent Army Nurse Corps, and Dean of Army School of Nursing; Elizabeth G. Fox, President National Organization for Public Health Nursing; Lucy Minnigerode, Superintendent of Nurses, U. S. Public Health Service; J. Beatrice Bowman, Superintendent Navy Nurse Corps; Harriet Bailey, Education Director Bellevue Hospital, New York.

It is felt that the interest and coöperation of these leaders in the nursing profession will be of inestimable value and assistance to the nursing service of the Bureau by interpreting to the public what the Veterans' Bureau is doing for the care of the ex-service men. This Advisory Nursing Committee will meet in

Washington, D. C., at the time of the next meeting of the Medical Council which is composed of eminent specialists in the medical profession throughout the United States, who meet in Washington, D. C., from time to time to advise the Director of the U. S. Veterans' Bureau on vital medical problems.

MARY A. HICKEY,
Superintendent of Nurses.

U. S. CIVIL SERVICE COMMISSION

Examinations for the position of trained nurse and for trained nurse (psychiatric) will be held in various parts of the country on Jan. 21, 1925, to fill vacancies in the Panama Canal Service.

Full information and application blanks may be obtained from the United States Civil Service Commission, Washington, D. C., or the secretary of the board of U. S. civil-service examiners at the post office or customhouse in any city.

INTERNATIONAL NEWS

France: The doctors of Soissons and its environs in The Aisne, to mark their appreciation of the public health work that Evelyn T. Walker is developing through the organization of *L'Association d'Hygiène Sociale de l'Aisne*, of which she is Directrice, have presented her with a bronze statue accompanied by a plaque bearing the inscription

Vers la Paix
a Miss Walker

Les medecins de Soissons et des Environs
reconnaisants

The statue, which represents a woman, her foot on a sword, her face set toward a longed-for goal, is the work of the eminent sculptor, M. de Levasseur.

It will be remembered that this Association is the development of the work of the American Committee which it made over to the people of the region before withdrawing from the work in France.

Turkey: Mary Hamilton Bethel, late Assistant Superintendent of Nurses in the American Hospital, Constantinople, Turkey, has returned to this country, after three and one-half years of service. Miss Bethel will re-enter the Navy Nurse Corps of which she was

formerly a member. She reports most favorable progress in the American School and the enrollment of an increasing number of Turkish women. Two Turkish nurses have been graduated; one is now instructor of theory in her own school, the other is doing public health nursing under the Turkish Red Crescent.

STATE NEWS

Colorado: THE COLORADO STATE GRADUATE NURSES' ASSOCIATION will hold its annual meeting in Pueblo on February 12.

Connecticut: The annual meeting of the Connecticut League of Nursing Education will be held on January 28, of the Graduate Nurses' Association on January 29, and the Organization of Public Health Nurses on January 30 at the Hotel Bond, Hartford. THE CONNECTICUT LEAGUE OF NURSING EDUCATION held its fourth regular meeting for the year 1924 in the Re-educational Building at the Connecticut State Hospital, Middletown. The morning sessions were omitted and the members were conducted through the various wards and visited the congregate dining room at the noon hour. At the afternoon session, Dr. Roy L. Leak, Superintendent of the Institution, welcomed the guests and spoke on the relation of psychiatric hospitals to nursing education, stressing the great need of knowledge in mental diseases to the medical and nursing professions in general. At a previous meeting, the Connecticut State Hospital announced a postgraduate course in Psychiatric Nursing. At the close of the meeting the members were given an opportunity to visit the new nurses' home now under construction, also the new reception hospital, where a demonstration was given in hydrotherapy. **New Haven.**—Elizabeth Ross, for three and one-half years Associate Superintendent of the New Haven Visiting Nurse Association, has resigned to take the position of Superintendent of the Visiting Nurse Association of Newton, Mass. Miss Ross did much to increase the efficiency of the Association, she gained the respect and confidence of other social workers in the city, and made friends among the nurses. Her going is a great loss to New Haven.

District of Columbia: Washington.—

The November meeting of the League of Nursing Education was held at the U. S. Naval Hospital. Captain James C. Pryor, in charge of the U. S. Medical School, welcomed the members and guests, among whom was Beatrice Monk, Matron, London General Hospital, England. After the business meeting, J. Beatrice Bowman, Superintendent of the Navy Nurse Corps, presented the subject: Obligations in Giving Credentials and References, which was followed by informal discussion. The Central School Committee reported 130 students attending the classes at George Washington University. A social hour followed in the Nurses' Home.

Florida: THE FLORIDA STATE NURSES' ASSOCIATION held its eleventh annual meeting on November 18 and 19 at the Pensacola Hospital, Pensacola, with Lillian Clarkson, vice president, presiding. The invocation was by Father Sands; the address of welcome by J. B. Morrow, after which the business meeting was held. Luncheon was served by the Sisters of Charity of the Pensacola Hospital and during this hour an interesting article was read on Chlorine Treatment by Doctor Lischkoff of Pensacola. At the afternoon session, Dr. Clarence Hutchinson gave a most interesting talk on Educational Standards for Nurses, Their Financial Status, and the Asset of Personality. This was followed by an address by Mrs. Louisa B. Benham, Secretary and Treasurer of the Examining Board for Nurses. The remainder of the afternoon session was devoted to business, and in the evening a banquet was given at the San Carlos Hotel with the members of District One as hostesses. The morning of November 19 was given over to the Public Health Section, with Mrs. Byrtene Anderson of the State Board of Health presiding. Joyce Ely, Public Health Nurse, Taylor County, read a paper on Red Cross Work in Florida. Following this, Jane Van De Vrede, Chairman of the Southern Division of the Nursing Service of the American Red Cross, spoke of the Red Cross with particular reference to the work the nurses have done in this organization and the prominence of their position in its management. Maternal and Infant Hygiene Work was discussed by N. M. Alvis and Lula A. Davis of the State Board of Health. Cora Baertsch gave a talk on

School Nursing on a Statewide Plan. Discussion was led by Isabel McCann. Frances Brink, Field Director of the N. O. P. H. N. gave an address on the aims and hopes of the Public Health Organization. Mollie Condon of the *Survey* and *The American Journal of Nursing* spoke of the necessity of the nurse keeping abreast of the times by taking courses in some branch of work, attending conventions, and by reading, laying particular stress on the last subject. Luncheon was served by the Alumnae of the Pensacola Hospital, after which the meeting was continued. Unfinished business was taken up and Miss Van De Vrede gave valuable and very welcome suggestions with reference to the transferring of members of the American Nurses' Association. Miss Rose M. Ehrenfeld, Representative from Headquarters of the A. N. A., gave an outline of the organization and formation of the American Nurses' Association and of the many branches composing it; of their meaning and the relation of each to the whole. This was followed by an address by Miss Van De Vrede on the subject of better and more universal care of the sick. The following officers were elected for the ensuing year: President, Mrs. Lucy Knox McGee, City Board of Health, Jacksonville; vice presidents, Margaret Greene, of Pensacola, and Jessie Lynch, Daytona; treasurer, Theresa Kohten, St. Luke's Hospital, Jacksonville; secretary, Elizabeth Steil, Riverside Hospital, Jacksonville. The members of the Association felt themselves particularly fortunate in having Frances Brink, Rose Ehrenfeld, Jane Van De Vrede, and Mollie Condon present at their meeting.

Georgia: THE GEORGIA STATE ASSOCIATION OF GRADUATE NURSES held its eighteenth annual meeting in Athens, November 17-19. No report has been received as yet. **Augusta.**—THE SECOND DISTRICT ASSOCIATION held a regular meeting at the Woman's Club House, November 10. A delegate was chosen to attend the State Convention. On December 8, a meeting was held at which a report of the State meeting was given by the President. The advantages of having State headquarters was discussed and a Ways and Means Committee was appointed. Rose M. Ehrenfeld, assistant director at Headquarters of the American Nurses' Association, was the guest

of the District, December 1-3. Inspiring talks were given to the nurses. She was entertained by the Woman's Club with a banquet, and by the members of the District with a reception.

Illinois: Chicago.—At a meeting of the ILLINOIS LEAGUE OF NURSING EDUCATION, held in the Chicago Nurses' Club, December 5, the guests of honor were Mary C. Wheeler and Laura R. Logan, President of the National League. Miss Logan gave a brief talk on the National and State Leagues, stating that this is a moment of history in the National League. She urged all nurses to feel a responsibility in the movement for the standardization of schools of nursing and that financial help will be needed from all state leagues. After Miss Logan's talk the meeting adopted the following resolutions: "That the Illinois League of Nursing Education accept the plan of the National League for re-organization, which provides that the members in the National League shall come in through the State League." THE CHICAGO TUBERCULOSIS INSTITUTE still has on hand some of the small leather frames containing the photograph of Edith Cavell. These make charming gifts either with or without the picture. They are sold at \$1 each for the benefit of the cottage for tuberculous nurses at Naperville, Illinois. Send orders to Chicago Tuberculosis Institute, 360 North Michigan Boulevard.

Indiana: Fort Wayne.—THE FIRST DISTRICT ASSOCIATION will meet the Hope Hospital Alumnae, January 10, at the Keenan Hotel. Laura R. Logan, Illinois Training School, Chicago, will be the principal speaker.

Iowa: THE IOWA STATE ASSOCIATION OF REGISTERED NURSES held its annual meeting in Des Moines, November 17-20, with 152 delegates and 623 nurses registered, each of whom was given a badge, a delegate's tag and a little State of Iowa name card with the city of Des Moines located by a blue star. The meetings opened on Monday, November 17, with the Red Cross in charge. Tuesday was the opening session of the general meeting, Adah L. Hershey presiding. The invocation was made by Rt. Rev. Harry S. Longley, Bishop Coadjutor of the Episcopal Church of Iowa, and the address of welcome by Hon. J. B. Weaver, Chairman of the Iowa Child Welfare Commission. Augusta Hefner, Instructor in

St. Joseph's Mercy Hospital, Sioux City, responded. The business meeting followed with reports from the officers, chairmen of the various standing committees, and the ten districts. Anna M. Drake, chairman of Legislation, reported a bill through, no nurse 21 years of age may practice as a G.N. or an R.N. without a license which is to be renewed annually charging a fee of \$1. Notices will be sent out from headquarters, published in the newspapers and Bulletin. The Governor makes the appointments for the nurses' Examining Board. Six names are presented from which 3 are chosen. Dr. L. D. Morehead, of the Medical School, Loyola University, Chicago, wrote a very interesting paper on Nurses' Training in Relation to Preventive Medicine. He was unable to be present. The Advisory Council met at luncheon in the Oak room and discussed its problems. The President reported 1235 paid up members. Miss Hefner of Sioux City gave a splendid report of the State Board of Nurse Examiners. She said that the papers written by nurses from some school showed too low entrance requirements both in teachers and students. That they had inadequate equipment, no recourses for material, lack of time for preparation of lessons and too long hours on duty; we need an educational director. Dr. Sonnichsen State Director of Vocational Education, Des Moines, spoke on Psychology of Ethics. The discussion by Helen Boyd, Director of School of Public Health Nursing, Iowa University, Iowa City, followed. Her main theme was the pre-school child's unquestioned obedience. Insurance as an Investment was presented by Frank Warren of Des Moines. Dr. Lee Hill of Des Moines gave a summary of recent experimental work in Scarlet Fever with demonstrations of the Dick Test. Dr. Merrill Meyers held a Cardiac Clinic which was very interesting and helpful. Pediatric ward patients with so-called heart disease present a pitiable scene. At a Board of Directors' meeting, Helen Needles was appointed custodian of the Service Flag which was presented to the State Association by Emma Wilson during the World War. Miss Wilson was appointed Historian. The Methodist Episcopal Hospital Training School Glee Club rendered beautiful music. Adah L. Hershey gave a splendid address on

Self Analysis and gave her report of the American Nurses' Association Convention at Detroit this summer. Bena M. Henderson, Superintendent of the Children's Hospital, Milwaukee, Wisconsin, gave a little history and the benefit of the three national nursing organizations and the American Journal of Nursing. All have the same aim; education, inspiration, advice and placement of the right nurse in the right place. A Pagent, History of Nursing, by Miss Drake and a number of others, was very clever and impressive. Wednesday morning was principally taken up with sectional meetings, each department having very helpful addresses and papers and election of officers. The general session opened at 10:30 with an address on Teaching Health to the Public by John P. Ryan, Professor of Public Speaking from Grinnell College. Major Julia C. Stimson was full of fun as well as serious and she brought us a real message from her love of the big outdoors. The Ex-Service, Nursing League, Private Duty and Public Health nurses each had luncheons with their own speakers which were greatly enjoyed. Dr. E. B. Winnett of Des Moines spoke on The Nurse and Diabetes. A diabetic tray was set up by Millie Kaksen, dietitian of the M. E. Hospital, Des Moines. Dr. Winnett's lecture was illustrated by lantern slides showing the destruction of the pancreatic cells. Mary E. Gladwin of St. Paul discussed private duty nursing. She said that it was the foundation for all other branches of the profession and no nurse has completed her education as a nurse or is equipped to be a Supervisor, Instructor, Assistant to a Physician or Surgeon, Public Health or School Nurse until she had a year of two of private duty nursing. The banquet in the ball room of the hotel was a great success. The entertainment included dancing, music, and stunts by each District. 'Father Time' presented the Association with a cake which held 21 lighted candles in honor of its 21st birthday. Miss Hershey received the cake and made a nice little speech in behalf of the Association. The Standard Chemical Co. of Des Moines furnished favors for the banquet which were very original and unique. The Theatre party at the Princes was much enjoyed. The students from the different training schools occupied the balcony. The

proceeds went to the Nurses' Relief Fund. Dr. Bird T. Baldwin, director of Child Welfare Research Station, Iowa University, Iowa City, gave an illustrated lecture on Normal Growth of the Child. One of the great things needed is coöperation. Iowa University is spending time, energy, thought and money on child development. The Nurse and Neuropsychiatric Problems or the Art of Nursing Mental Cases was presented by Dr. Frank Ely. The association business was finished in the afternoon and all enjoyed an auto ride over the city and tea at Broadlawns a new Tuberculosis sanatorium, which is very nicely equipped and located. The convention was voted a decided success. Those present feel that the officers, committees and Des Moines citizens certainly know how to entertain. **Burlington.**—DISTRICT 2 was entertained by the Burlington Hospital Alumnae on September 27 at a meeting held in the Nurses' Home. The business meeting was followed by an interesting program and a banquet, with dancing and cards in the evening. The students of the Burlington Hospital gave a Hallowe'en party for the alumnae. The Alumnae have been working for the building fund for the new addition to the Hospital. They raised \$790 by two rummage sales and \$186 by an excursion in August. **Davenport.**—THE IOWA BRANCH OF THE CATHOLIC HOSPITAL ASSOCIATION held its fourth annual convention at Mercy Hospital, November 11-13 with a large attendance. Monica Evers, class of 1921, Mercy Hospital, has accepted a position in the Philadelphia General Hospital. **Ottumwa.**—THE OTTUMWA HOSPITAL has as Superintendent, Lydia Neumeyer, and assistant superintendent, Miss Lind, both of Bismarck, N. D. The Ottumwa Hospital Association gave a Hallowe'en party on October 28 for the alumnae and students. The alumnae held their September meeting with Estella Akers and the October meeting with Mrs. John Harsch. **Mount Pleasant.**—Margaret Stoddard, Superintendent of Henry County Hospital, attended the convention of the American Hospital Association in Buffalo in October. **Massachusetts: Boston.**—Mary Beard has resigned her position as Director of the Nursing Service of the Community Health Association after twelve years of service. She

is succeeded by Florence M. Patterson. Miss Beard will make a study for the Rockefeller Foundation in England of maternal care as given in public health centers. **Fall River.**—The nurses of the FALL RIVER GENERAL HOSPITAL held a dance on November 28 which was a financial and social success. The officers of the Alumnae Association for 1925 are: President, Laura Sullivan; vice president, Harriet Briggs; secretary, Ann Whitaker; treasurer, Florence Graham. **THE UNION HOSPITAL NURSES' ALUMNAE** held their annual meeting on December 3 at the Nurses' Home and elected the following officer: President, Mrs. F. B. Albert; vice president, Jennie Smithers; recording secretary and assistant, Katherine Doherty, Mrs. Sarah Pelletier; corresponding secretary and assistant, Mary E. Mason, Gertrude V. Walsh; treasurer, Annie E. Duffy. A very successful sale was held on November 8,—proceeds, \$325. **Waverly.** **THE McLEAN HOSPITAL SCHOOL OF NURSING** held graduation exercises on October 29 in the Samuel Eliot Memorial Chapel for its 38th class, composed of 12 women and 9 men, making the total number of graduates from the school, 991. The Trustees established the School in 1882, the first organized in this country for the purpose of training nurses with special reference to mental nursing. The School gives a three years' course, one of which is spent in a general hospital. The address was delivered by Linda Richards, the first nurse to graduate in America. George Wigglesworth presented the diplomas and the exercises were ended with the singing of the school song. A reception and dance followed, in the Administration building. **Westfield.**—**THE NOBLE HOSPITAL ALUMNAE ASSOCIATION** held its annual business meeting on December 5, when the following officers were elected: President, Mary M. Hyde; vice presidents, Elizabeth C. Miles, Frances B. Iler; secretary, Hazel E. Cowles; treasurer, Ann R. Austin.

Michigan: **THE MICHIGAN BOARD OF REGISTRATION OF NURSES AND TRAINED ATTENDANTS** will hold an examination for graduate nurses and trained attendants at Marquette, Michigan, January 7 and 8, 1925, Helen deSpelder Moore, secretary. **Calumet.**—Manilla Noetzel, graduate of the Blodgett Hospital, Grand Rapids, has been appointed Directress of Nurses

of the Calumet Memorial Training School. Mabel Stukey of St. Louis has accepted a position as X-Ray and Laboratory Technician at the same hospital. The nurses of the Memorial Hospital are now comfortably located in their new home, the beautiful residence of the late Dr. Lawbaugh. The residence has been given to the Training School, to be used as a home for the nurses, and is a fitting memorial to the beloved physician, who was ever their friend. **Detroit.**—**THE FARRAND TRAINING SCHOOL ALUMNAE** have appointed the following committee to perfect plans for the management of the Bed Endowment Fund for sick nurses of the Training School. The objective of the fund is \$50,000. Those who are to serve for three years are: Emily A. McLaughlin, the Misses Prenzlaure and Ross, and Mrs. Todd. Those who are to serve two years are Miss Massey, Miss Wright, Miss Sly and Mrs. Westendorf; those who are to serve one year are: Mrs. Poole, Mrs. Tarleton and Mrs. Brightenbacker. **THE LOCAL LEAGUE OF NURSING EDUCATION** met at the Receiving Hospital, December 4. Twenty-five members were present. The topics presented were varied. Mrs. L. E. Gretter spoke of the desirability of headquarters for the State Association with a full time secretary. Helen B. North, the Secretary, gave a report of her activities in connection with books on the subject of nursing, to be furnished by the Detroit Public Library as suggested by the League. A report concerning plans for the trip to Helsingfors, Finland, was read. Agnes Gordon, Superintendent of Nurses at the Receiving Hospital, served tea. **THE FIRST DISTRICT ASSOCIATION** held its regular meeting in St. Paul's Cathedral Auditorium, December 5; 75 members were present. The program was under the auspices of the Public Health Section. Mrs. Helen deSpelder Moore, Secretary of the Michigan State Board of Nurse Examiners, Alice Lake, Superintendent of Nurses at the University of Michigan Hospital, and Elba Morse, Red Cross Supervisor in Michigan, were the speakers. The subject under discussion was the proposed County Nurses' Bill. **Hancock.**—The regular meeting of the **THIRTEENTH DISTRICT**, was held December 6, at the Scott Hotel, and was a very enjoyable affair. In

addition to the business meeting, an interesting paper, *Diet and Its Effect upon the Teeth* was read by Dr. Messinger of Houghton. Following the meeting dinner was served at the hotel. **Jackson.**—The student nurses of the W. A. FOOTE MEMORIAL HOSPITAL held their first meeting of the new school year Thursday, November 7th. The election of officers for the ensuing years resulted—Verna Clay, president; Nina Winegar, vice president; Gladys White, secretary and treasurer. The four delegates to the convention held in Detroit gave their reports which proved interesting. Plans for a benefit dance to be held in February were discussed. A meeting will be held the first Thursday in every month.

Minnesota: Duluth.—THE SECOND DISTRICT ASSOCIATION held its regular meeting, November 14, at the St. Mary's Nurses' Home. Reports of the delegates to the State Meeting were given. Refreshments served by the St. Mary's nurses. **ST. MARY'S HOSPITAL ALUMNAE ASSOCIATION** held its regular meeting at the Nurses Home, Dec. 9. Reports of the delegates to the State Meeting were given. Sr. Stella, reported on Red Cross Activities and urged every nurse to join the local chapter. The Association approved sending \$50 to the Nurses' Relief Fund and made arrangements to have a dance, Jan. 9, in the Cathedral Auditorium, the proceeds to help equip the new operating rooms in the Hospital. The Senior nurses were guests at the meeting. A great deal of enthusiasm was shown by the private duty nurses in regard to having an active Private Duty Section in the District. Ten new members were accepted. **ST. LUKE'S HOSPITAL ALUMNAE ASSOCIATION** held its regular meeting at Mrs. Oscar Erickson's home on December 9. A committee was appointed to make arrangements to entertain the Senior Class. It was decided to send \$25 to a sick member, pending decision of the Nurses' Relief Fund Committee. Three applications for membership were accepted. **St. Paul.**—**ST. JOSEPH'S HOSPITAL ASSOCIATION** held its annual meeting November 14. The committees gave their reports for the year, and the following officers were elected: President, Anna Stein; secretary, Barbara Hageman; treasurer, Marcella Ratchford. The Alumnae has an active membership of 111 and a social mem-

bership of 50. Fourteen members were accepted this year. Four members attended the national convention, in Detroit, the expenses of one being defrayed by the Association. The Alumnae entertained the 1924 graduating class at a banquet at St. Joseph's Hospital. This was a real homecoming, 103 members being present for the festivities. **THE PRIVATE DUTY SECTION** of the Fourth District Nurses' Association was entertained at St. Joseph's Hospital in September, the Alumnae acting as hostess. After the Business meeting a program was given and refreshments served. During the year, the President, Miss Rodewald, resigned on account of ill health, and is now at the State Sanatorium, Walker, Miss Ginther, the vice president, fills this vacancy. A purse was presented to Miss Rodewald through liberal donation of the members. A farewell party was given for Miss Brunner who resigned her position as surgical supervisor at St. Joseph's Hospital. Celesta Smith and Alvina Miller have joined the nurse corps of the U. S. Veterans Bureau. Gertrude Schneider, Helen Gavin, and Mildred Berens have joined the Navy Nurse Corps. Miss Margaret Rogers, formerly Superintendent of the Lafayette Home Hospital, Lafayette, Indiana, is now Superintendent of St. Luke's Hospital.

Missouri: Kansas City.—Grace Perley, class of 1913 Red Cross Hospital of Kansas City, Missouri and recently of U. S. V. H. No. 79 Dawson Springs, Ky., sailed Oct. 25 to serve in a Mission Hospital of the Methodist Church located near Bombay, India. **St. Louis.**—**WASHINGTON UNIVERSITY SCHOOL OF NURSING ALUMNAE ASSOCIATION** gave its annual bazaar on November 20, at the Nurses' Home. Among the articles sold were wooden toys made by patients in the Shriners' Hospital for Crippled Children. The sum of \$1,100 was cleared and will be added to the fund being raised to provide care during illness for members of the Association. **THE LUTHERAN HOSPITAL** held its twenty-fifth annual commencement exercises for a class of 15 on October 14. **THE ALUMNAE ASSOCIATION** entertained the graduates at a banquet at the Melbourne Hotel on October 15. The Alumnae held a coffee and sale at the Nurses' Home on October 23 which was a social and financial success.

Nebraska: York.—THE LUTHERAN HOSPITAL held graduating exercises for five members, November 9, at Emmanuel Lutheran Church. An address was delivered by Rev. W. Becker. He was followed by Rev. O. Batz who, as a member of the board of directors, presented the diplomas. The class motto was *Our Lives Are Devoted*. Emma Schuelke, Superintendent of the Hospital, presented the hospital pins. On Monday evening a banquet was given at the assembly hall of the Hospital in honor of the 1924 graduates, which was most delightful.

New Hampshire: THE STATE BOARD OF HEALTH conducted a three-day health institute at the State University at Durham, last July, with an attendance of physicians, nurses, health officers, social workers, teachers and laymen. The quarterly meeting of the NEW HAMPSHIRE STATE GRADUATE NURSES' ASSOCIATION was held at the Emily Smith Nurses' Home, Elliot Hospital, Manchester, December 10. Sessions of the Nursing League of Education, the Public Health Section and the Private Duty Nurses' Section were each held at 10:30 A. M. The regular meeting was held at 2 P. M. After the business meeting an interesting talk was given by Mrs. Yantis on Legislation, also the details about the Child Labor amendment were explained. The Association decided by a rising vote to favor this amendment. The March meeting will be held at the Concord Memorial Hospital by invitation of Miss Fuller. A social hour followed.

New Jersey: THE NEW JERSEY STATE ORGANIZATION FOR PUBLIC HEALTH NURSING will hold its annual meeting in Atlantic City on January 24. **Hackensack.**—The Annual Meeting of the NURSES' ALUMNAE ASSOCIATION OF THE HACKENSACK HOSPITAL, was held in the Nurses' Home, November 3. Officers elected for the new year, were: President, Mrs. Ralph Gilady; vice president, Edna Gurnee; secretary, Mrs. Estelle O'Neill; treasurer, Kathryn L. MacLeod. Proceeds from the rummage sale for the Endowment Fund amounted to \$125.30. A letter of appreciation was read from Mrs. Mary Stone Conklin, Superintendent of the Hospital, thanking the members for their coöperation during vacations, twenty-five members having served as general duty nurses, for one month each, during the sum-

mer, thus enabling the students to have their vacations. **Long Branch.**—The students of the class of 1925, MONMOUTH MEMORIAL HOSPITAL, gave a play on November 21, entitled *Bashful Mr. Bobbs*. They realized \$300 which will be used to issue the annual Class Book. There are twenty-two members in the class; the play was a great success.

New York: THE NEW YORK STATE LEAGUE OF NURSING EDUCATION held its annual meeting in Syracuse, October 28, with a large attendance. Important matters discussed were: the Report of the secretary of the State Board of Nurse Examiners, Public Health in the Fundamental Nursing Curriculum, and Scholarships and Their Use. Special interest centered around the address of the President, Miss Hilliard, as it was her last as an officer of the League. She called special attention to the sale of calendars and to the Institutes. Her farewell message, however, was for a standardization of schools of nursing and coöperation with the Education Department. There was some discussion on the revision of the by-laws to conform with those of the National League. Since it was impossible to have the revision of the by-laws ready for this meeting, a resolution was passed sufficient to cover the change in dues. Special attention might be called to the marked interest in the Round Table on Ethics, conducted by Miss Burgess, for the State Nurses' Association. About three hundred attended, showing the importance of the subject. Two teaching institutes have been held during the past year, one in New York City and one in Albany. The next annual meeting will be held in Albany, in October, 1925. The following officers were elected for 1925: President, Elizabeth C. Burgess; vice president, Elizabeth LeRoy; secretary, Mary McPherson; treasurer, M. K. Smith. Chairmen of Committees are: Education and Publicity, Grace E. Allison; Credentials, Helen Young; Nominations, Miss Tibbets. Nancy E. Cadmus, long prominent in State work, has gone to Denver to become a member of the staff of the new University Hospital School of Nursing.

Amsterdam.—THE AMSTERDAM CITY HOSPITAL TRAINING SCHOOL held its graduation exercises at the New East Main Street School

Auditorium, December 1. Twelve nurses were graduated. Mrs. Anne L. Hansen, President of the New York State Nurses' Association, gave the graduation address. A reception followed. **Elmira.**—THE ARNOT-OGDEN HOSPITAL ALUMNAE ASSOCIATION held its November meeting at the Nurses' Home on the 5th, with a large attendance. Fourteen new members were accepted, most being members of the Class of 1924. M. Emily McCreight, Superintendent of the Hospital, spoke of the new hospital building to be erected and of the drive to raise \$650,000. A committee of twelve members was named and plans were made for helping in the drive. Informal reports were given of the State meeting. After the business meeting, members of the Program Committee were hostesses at tea. Agnes Suttzer has resigned her position as obstetrical supervisor. Marguerite Riker is an instructor at the Corning City Hospital. **New York.**—THE NEW YORK INDUSTRIAL NURSES' CLUB met at the Carroll Club on November 13 and enjoyed a talk by Mrs. Mary E. Hamilton from police headquarters on Fingerprints for Protection. Sarah J. Graham has been reappointed State Chairman of the Nurses' Relief Fund Committee. The fifth annual bazaar in aid of the Sick Benefit Fund of the ALUMNAE ASSOCIATION OF THE METROPOLITAN HOSPITAL SCHOOL OF NURSING was held at the Nurses' Home on November 6. This bazaar was, as usual, a great success. Edith M. Hurley has been appointed Supervisor of the Morningside Center of the Henry Street Visiting Nurse Settlement. **Rochester.**—THE GENESEE VALLEY NURSES' ASSOCIATION held a meeting on November 25 at the Club House. Helen Wood who has recently come to the city to take charge of the School of Nursing of the University told of the plans for the new medical and nursing schools. Miss Bates of Clifton Springs gave a good report of the State meeting. Georgia A. Morrison, Class of 1913, Presbyterian Hospital, New York, has been appointed Superintendent of the School of Nursing of the Rochester General Hospital. THE ROCHESTER HOMEOPATHIC HOSPITAL ALUMNAE held a meeting at the Hospital, November 3, and elected the following officers: Second vice president, Christine Verstrings; recording secretary, Janet M. Scott; corre-

sponding secretary, Alice Baird. **Saranac Lake.**—The regular monthly meeting of the Saranac Lake Graduate Nurses' Association, District No. 8, was held at the home of Alida B. Craig on December 2. An appeal was made by Madeline Smith for the Nurses' Relief fund. The response to the appeal was generous and most encouraging. Following the business meeting tea was served.

North Carolina: Asheville.—District No. 1. The December meeting was entirely a business one, Mary P. Laxton, President of the State Board of Nurse Examiners, read the new Nurse Practice bill, which is to be presented to the State Legislature early next year. A very cordial letter was received from the Secretary of the City Federation of Woman's Clubs welcoming the nurses, back into that association. \$100 was contributed to the State Nurses' Relief fund. It was also decided to send a sum of money to help defray the expenses of the International Council of Women, which meets in Washington in May. The custom of remembering invalid nurses with useful Christmas gifts, will be continued this year. A report from the Chairman of the Christmas seal committee was very encouraging.

Ohio: Cincinnati.—Thekla Hoffman, a graduate of Bethesda Hospital, has recently gone to India as a missionary nurse. **Cleveland.**—On October 16, the Board of Trustees of LAKESIDE HOSPITAL, gave a reception and tea, in the Flora Stone Mather Hall, Lakeside Hospital in honor of the Alumnae of the Lakeside School of Nursing, to meet Robert E. Vinson, President of the Western Reserve University, Louise M. Powell, Dean of the School of Nursing, and Helen M. Smith, Dean of the College for Women. DISTRICT No. 4, gave a reception and tea at the Cleveland Nursing Center on November 11, in honor of Louise M. Powell. District No. 4 held its November meeting on the 18th at the New Medical Building, of Western Reserve University where after the business session, a very interesting tour of the building was made. Laura M. Grant, Principal of the Lakeside School of Nursing is holding a series of Sunday afternoon teas in Flora Stone Mather Hall. The Lady Board of the School of Nursing are alternating. **Columbus.**—The new

nurses' home, Hutchinson Hall, of the WHITE CROSS HOSPITAL, was dedicated on November 9 with an interesting program which included addresses by Rev. N. E. Davis and Bishop T. S. Henderson. Jessie Harrod is Principal of the School of Nursing.

Oregon: Albany.—Freda Folkman and Hilda Jacobson are filling responsible positions at the Albany General Hospital, Miss Folkman is Supervisor of the surgery, and Miss Jacobson is in charge of the obstetrical department. **Eugene.**—Miss Roscran has recently taken charge of the Eugene General Hospital. Annie Hunter and Ella Hiley have accepted positions in New York City. An interesting lecture on Abnormal Psychology, by Dr. DeBusk, of the Oregon University, was given at last month's meeting. **Portland.**—Elizabeth A. Fox, Director of Public Health Nursing for the American Red Cross, and President of the National Organization for Public Health Nursing, spoke at the Social Worker's Association of Oregon, November 12. She gave some very interesting items on nursing in Europe, especially in England. Miss Fox spoke again in the evening at Library Hall on Public Health Work Which It is Possible for Private Duty and Student Nurses To Do. Dorothy Ledyard, Director of Public Health Nursing for the Pacific Division of the Red Cross, spoke on Red Cross Enrollment, the same evening. The student nurses of St. Vincent's Hospital, gave a very successful Minstrel Show, November 29. The proceeds are to be used to buy books for the nurses' library. On November 26, the Private Duty Nurses gave an unusually good musical program before the members of District No. 1. Florence Potts, Director of Nursing for the Shriners' Hospital, spent three days visiting the Portland Shrine Hospital, during the month of November.

Pennsylvania: Altoona.—THE ALTOONA HOSPITAL NURSES' ALUMNAE ASSOCIATION met on December 4 and elected the following officers: President, Gertrude Johnson; vice president, Ruth Roup Plummer; secretary, Frances Hopper; corresponding secretary, Mrs. Kathryn Ramsey Nepper; treasurer, Mrs. Bessie Casewell Beaner. On November 6, a benefit card party was held, the proceeds of

which, \$95, will help swell the building fund. Eva Sadler, who has been doing school work in Philadelphia, has sailed for Java to do mission work. **Germantown.**—THE ALUMNAE ASSOCIATION OF THE GERMANTOWN HOSPITAL held its annual meeting on November 18 with a good attendance. Officers elected are: President, Mabel E. Prince; vice president, Dora E. Warner; secretary, Josephine M. Greswold; treasurer, Jane M. Biedelman; directors, Mrs. Sue Peters Ballantyne, Mrs. Harriet O'Donnel, Mary Keller. Dora E. Warner, delegate to the State meeting, gave an interesting report. **Johnstown.**—THE FIFTH DISTRICT ASSOCIATION held its November Meeting in the Nurses' Home of the Conemaugh Valley Memorial Hospital, November 19, Mollie Beers, presiding. One hundred and two members and guests were present. Miss Wilson of Clearfield, delegate to the State Convention, was unable to attend. The report was read by Anne Faith of Johnstown. The principal address, which was greatly appreciated by all, was given by Roberta M. West, Secretary-Treasurer of the State Board of Examiners. Ida F. Giles, Director of Nurses of the Conemaugh Valley Memorial Hospital, spoke and urged all nurses to join the American Red Cross. Bregetta Pfeiffer of Mercy Hospital, Johnstown, was elected first vice president to fill the unexpired term of Anna Neary. A delightful luncheon was given by William J. Finn, Superintendent of the Conemaugh Valley Memorial Hospital. The annual meeting of the District will be held at the Altoona Hospital. **Lebanon.**—Members of District 2 met at the Good Samaritan Hospital, Nov. 15. Nurses were in attendance from Nazareth, Allentown, Easton, Bethlehem, Reading, Pottsville and Lebanon. Caroline M. Swift, Supervising Nurse, Reading Hospital, was appointed to act as chairman of the individual members. A. L. Hauer, M.D., Lebanon, delivered an interesting and very instructive address on Diabetes and Insulin. Mrs. Margaret Bailey, Supervising Nurse, Pottsville Hospital, gave a full report of the State Convention. A card sent out by the American Nurses' Association was read, announcing the coming International Congress of Nurses, to be held in Finland in 1925. The Alumnae Association of St. Luke's Hospital,

Bethlehem, Pa., extended an invitation to hold the annual meeting in Bethlehem, a social hour followed. **Philadelphia.**—THE HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA held graduating exercises for a class of 45 on November 26. The address was given by Charles H. Miner, M. D. State Secretary of Health. A reception and dancing followed the exercises. **HAHNENMANN HOSPITAL ALUMNAE** have added six new members since meetings were resumed in September. Good reports have been given of the national and the state conventions. The Association contributed \$150 to the Nurses' Relief Fund, and \$25 to the Hospital on Donation Day. In November, a card party and dance were given which were so successful that it was decided to hold another soon. Two one-hundred dollar treasury certificates have been given for the Endowed Room Fund by Miss Stoeber in appreciation of services rendered her during her illness. The revised by-laws of the Association will be sent out early in the year. **THE ALUMNAE ASSOCIATION OF THE PHILADELPHIA GENERAL HOSPITAL** held a regular meeting on December 1 in the Nurses' Home. Mary Ogden, Second Assistant Superintendent of Nurses, spoke most interestingly of nursing and health conditions in China from which country she has recently returned. Anna J. Haines, who was a member of the first unit of the American Friends' Service Committee sent to Russia in 1916 and who arranged for the first cars of food shipped down to the famine area in 1920, returned to this country in 1921 and entered the Philadelphia General Hospital School of Nursing. Miss Haines has had the postgraduate course of the Philadelphia School of Social Work and Public Health and has had supervising practice experience in the infirmary and dispensary of Bryn Mawr Summer School for Women in Industry. With this splendid background, she will return to Russia early in February, to work in cooperation with the Health Department of the Russian Government. **Pittsburgh.**—THE SIXTH DISTRICT ASSOCIATION held a meeting on December 4 at Memorial Hall, when the annual lecture provided by the Mary Budd Turpin Fund was given by Annie W. Goodrich of New Haven. Mrs. Gilliford Sweeny told of the origin of

the Fund established by the Twentieth Century Club as a memorial to Miss Turpin. Mrs. William M. McKelvy gave a sketch of Miss Turpin's life. Miss Turnbull who is President of the State Association and of the District Association presided. A dinner was given in honor of Miss Goodrich preceding the meeting. Music was furnished by the Nurses' Glee Club of the Allegheny General Hospital. One thousand and more nurses were in the audience and amplifiers made the speakers easily heard. Miss Turpin, who was a graduate of the Woman's Hospital, Philadelphia, was Superintendent of the Eye and Ear Hospital, Pittsburgh, during the war. Her efforts then, when workers were few, her outside work in conducting First Aid classes, and her final service during the influenza epidemic resulted in her death in January, 1919. The lecture fund was set apart in her honor. At the December meeting of the **NURSES' ALUMNAE OF THE ALLEGHENY GENERAL HOSPITAL** the following officers were elected to serve for 1925: President, W. Emma Scheideman; vice president, Elizabeth McMichael; recording secretary, Elizabeth Sachs; corresponding secretary, Mary E. Zinck; treasurer, Maude E. Bergner; member of Board of Directors, Leili Barnhart. The meeting was well attended and the interest shown gave great promise for the coming year.

Rhode Island: THE RHODE ISLAND STATE NURSES' ASSOCIATION will hold its annual meeting late in January at the Medical Library in Providence. **Pawtucket.**—THE MEMORIAL HOSPITAL ALUMNAE held a successful rummage sale on November 1, netting \$125 for the Endowed Bed Fund. A committee was appointed to arrange for the annual dance to be held at the Plantation Club, Providence, early in January. A Christmas party was held on December 12 at the Graduate Nurses' Home for the Alumnae. **Providence.**—A joint meeting of the RHODE ISLAND HOSPITAL ALUMNAE and the NURSES' CLUB was held on November 25 at the Nurses' Home. Millie Weir, class of 1918, Superintendent of Nurses at the Church Hospital, Changchu, China, gave an illustrated talk on her work. **St. JOSEPH'S HOSPITAL ALUMNAE** gave a successful whist party at the rooms of the District Nursing Association on November 25. The proceeds

are to be used for the endowment of the Nurses' Room.

Tennessee: Memphis.—UNIT P. was entertained by Miss Colquitt and Miss Cummins on Armistice Day.

Utah: THE UTAH STATE NURSES' ASSOCIATION will hold its annual meeting on January 5.

Virginia: THE VIRGINIA STATE BOARD OF EXAMINERS OF NURSES will hold its semi-annual examinations in Richmond, January 13, 14 and 15, 1925. For further information apply to Ethel M. Smith, Secretary, Craigsville, Virginia.

Washington: Seattle.—The nurses of Western Washington were given the opportunity of listening to and becoming acquainted with Elizabeth G. Fox, National Director of Red Cross Nursing Service. Miss Fox was guest of honor at the annual banquet given by the University of Washington Nurses' Club, Nov. 13 at University Commons. There were 115 nurses and nurses-to-be at the banquet, including seventeen guests, Hospital Superintendents, public health officials, alumnae, graduate nurses who are taking the Public Health Course at the University, and students taking the five-year nursing course, the nurses of Tacoma, being well represented. Under the auspices of the Red Cross Nursing Committee, Miss Fox spoke to a mass meeting of nurses, many of whom where Red Cross Nurses, on the Red Cross Public Health service. Dorothy Ledyard, Director of Pacific Division Red Cross Nursing Service, spoke on enrollment. An informal reception was held after the meeting, that the nurses might become better acquainted with Miss Fox and Miss Ledyard. Under the auspices of the National Guard, State of Washington, and King County Medical Society a public demonstration of Life Saving methods and first aid contests was held on Dec. 4, participated in by teams from Regular Army, National Guard, Swedish, Columbus and Minor Hospitals, City Fireman and Boy Scouts. There was a wonderful showing; all teams did so well there was a difference of only seven points. Minor Hospital received first prize, a silver trophy cup presented by King County Medical Society, and Boy Scouts second prize, a silver trophy cup, presented by Columbian Optical

Co. Tacoma.—District 3 has reorganized and put on an enthusiastic membership drive, getting many new members. When District 3 is completely reorganized it will have an Official Directory under the management of the District Association.

Wisconsin: Ashland.—The Eleventh District held its September meeting at St. Joseph's Hospital, September 27. After the business meeting a musical program was given and lunch was served. The District Association met at the Ashland General Hospital on November 29. Dr. R. L. Gilman gave a talk and some demonstrations on the Dick Test for Scarlet Fever. Music and a social hour followed. **Kenosha.**—THE FIRST DISTRICT held its regular meeting, November 11, at the Kenosha Nurses' Home. Emilie Boyd gave a comprehensive report of the State meeting. A social hour followed. **Madison.**—THE THIRD DISTRICT held a meeting in the Capitol Annex, November 18. The hostesses were the Public Health Nurses. Harriet C. Long, Chief of the Traveling Library and Study Club Department of the Wisconsin Free Library Commission, spoke of her work. **Milwaukee.**—THE FOURTH AND FIFTH DISTRICT held its regular monthly meeting at the Wisconsin Nurses' Club. Reports were given from the State convention and the Alumnae of the District reported on recent meetings and the plans for the future. Milwaukee Hospital Alumnae served refreshments. THE WISCONSIN NURSES' CLUB held its annual bazaar, December 6. Over three hundred people attended the affair which was a decided success. Cards were played both afternoon and evening. Over \$1,200 was cleared for the benefit of the Club. Loretta Franks was the Chairman of the Bazaar. THE ALUMNAE ASSOCIATION of MT. SINAI HOSPITAL gave a bazaar, November 22. The results were gratifying to all who helped make it a success. A delicious lunch was served and dancing was the event of the evening.

MARRIAGES

Sigrid Anderson (class of 1917) to Robert Taylor, November 27. At home, Los Angeles, Calif.

Maud C. Bradish (class of 1914, Walla Walla General Hospital, Walla Walla, Wash.),

to Wilbert H. Place, December 1. At home, Amarillo, Texas.

Margueritte Cook Daniels (class of 1921, Marion General Hospital, Ocala, Fla.), to Francis T. Metzger, October 19. At home, Williston, Fla.

Lillian B. Ferguson (class of 1923, Good Samaritan Hospital, Portland, Ore.), to Norris R. Jones, M.D., October 28. At home, San Francisco, Calif.

Elizabeth M. Fitzpatrick (class of 1918, Metropolitan Hospital School of Nursing, Welfare Island, N. Y.), to William E. Leahy, October 14. At home, Chapeau, Quebec, Can.

Florence Gray (class of 1917, The Grace Hospital, Detroit), to C. Emerson Vreeland, M.D., October 2. At home, Detroit, Mich.

Gurea Hage (class of 1921, Good Samaritan Hospital, Portland, Ore.), to Joseph E. Arnold, November 27. At home, Portland.

Anna Hoertlein (class of 1914, Lutheran Hospital, St. Louis, Mo.), to Ernst Hasselt, in October. At home, St. Louis.

Jane Hornibrook (class of 1924, Good Samaritan Hospital, Portland, Ore.), to Richard B. Joyce, in October. At home, Newberg, Ore.

Catherine M. Johnstone (class of 1924, American Stomach Hospital, Philadelphia), to Charles R. Fox, M.D., October 8. At home, Northampton, Pa.

Florence Kenevan (class of 1921 St. Joseph's Hospital, St. Paul, Minn.), to Joseph Redmond, Nov. 29. At home, Brown's Valley, Minn.

Virginia M. Krom (class of 1917, Dixmont Hospital, Dixmont, Pa.), to John Harry Geddes, November 26. At home, Cleveland, O.

Mary Laskowski (class of 1916, St. Mary's Hospital, Duluth, Minn.), to Lewis Bullard, November 15. At home, Duluth.

Alice Lucy Light (class of 1921, Lankenau Hospital, Philadelphia), to Cornelius W. Stevenson, December 6. At home, Harrington, Del.

Clara E. Maltsberger (class of 1916, Christ's Hospital, Topeka, Kans.), to Royal N. Shaw, November 5. At home, Yakima, Wash.

Pearl M. Martz (class of 1913, Methodist Episcopal Hospital, Philadelphia), to Edward R. Houtz, November 26.

Ethel G. Maytrott (Woman's Hospital, Philadelphia), to V. Miller Yarnall, November 25. At home, Fox Chase, Pa.

Luell C. Meier (Jewish Hospital Training School for Nurses), to John H. Schaller, November 28.

Helen Murphy (class of 1921, Union Hospital, Fall River, Mass) to James H. Fay, October 14.

Irene Murphy (class of 1920, St. Joseph's Hospital, St. Paul, Minn.), to Norman M. McIver, Nov. 10.

Dora Oehmig (class of 1914, Erlanger Hospital, Chattanooga, Tenn.), to Carl Watson, November 26. At home, Chattanooga.

Ertme Preikschat (class of 1916, American Stomach Hospital, Philadelphia), to George W. Hosfeld, October 25.

Mildred Quinn (class of 1924, Braddock General Hospital, Braddock, Pa.), to Mr. McNamoy, November 18. At home, Connelville, Pa.

Lucile Rammel (class of 1919, Decatur and Macon Co. Hospital, Decatur, Ill.), to Chester Mays, November 2. At home, Decatur, Ill.

Christine Seewald (class 1918, The Grace Hospital, Detroit), to C. Harry Cartier, November 19. At home, Detroit.

Ethel Spicher (class of 1922, Memorial Hospital, Johnstown, Pa.), to Charles Smith, October 30. At home, Cumberland, Md.

Ethel Stanford (class of 1910, Northwestern Hospital, Minneapolis, Minn.), to Milton B. Miles, November 25. At home, Fargo, N. D.

Irene Mary Tobin (class of 1917, St. Mary's, Duluth, Minn.), to Rudolf John DeWaard, November 14. At home, Duluth.

Marie Tournant (class of 1920 St. Joseph's Hospital, St. Paul, Minn.), to Edward T. Kollofski, Oct. 8. At home, St. Paul, Minn.

Pearl Trees (class of 1920, Memorial Hospital, Johnstown, Pa.) to Lloyd Heinze, October 11. At home, Johnstown.

Edna Uttinger (class of 1924, Christ's Hospital, Topeka, Kans.), to I. R. Elliott, November 15. At home, Emporia, Kans.

Nellie VanDyke (class of 1918, Metropolitan Hospital School of Nursing, Welfare Island, New York), to Frank Lefebvre, October 12. At home, Brooklyn, N. Y.

Katherine Wagner (class of 1922, Memorial Hospital, Johnstown, Pa.), to Ralph Murdock, October 25. At home, Johnstown.

Nellie Watterson (class of 1920, Mercy Hospital, Davenport, Ia.), to Herman Wesenberg, October 23. At home, Davenport.

Annetta Westcott (class of 1919, Union Hospital, Fall River, Mass.), to George Jones, October 23.

Emma A. Wilson (class of 1924, St. Joseph's Mercy Hospital, Detroit, Mich.), to Wm. G. Weber, October 6. At home, Detroit.

Annetta Westcott (class of 1919, Union Hospital, Fall River, Mass.) to George Jones, October 23.

Ella V. Wilderson (class of 1897, Boston City Hospital, Boston) to William M. Cat-tell, October 1. At home, Smithfield, O.

DEATHS

Stella Becker (graduate of Speers Memorial Hospital, Dayton, Ky.), recently. For six years after graduation Miss Becker was assistant supervisory nurse for the Public Health Association of Cincinnati. In 1917 she went to Decatur, Ill., where she was the pioneer public health nurse. After the weeks of preparatory work in educating the community, she established a nursing service for the Metropolitan Life Insurance Company which grew so rapidly that four nurses are now employed. During the World War, she organized and conducted Red Cross home nursing classes in the rural districts of Macon county. Through the coöperation of a few physicians, she found out about several tuberculosis patients, and she started instructive work among them. A number can say that they owe their recovery to her constant, watchful care. She also organized weekly clinics for tuberculosis patients, which served to keep up public interest, then later a survey of Macon county was made which showed the need of a sanatorium. Eventually her dreams were realized, for last year Macon county built a beautiful sanatorium, where many of her former patients received the care that was not possible for them to receive at home. Under her supervision were the clinics for crippled children and for baby welfare. The latter grew so rapidly that it had to be

taken under a separate supervision. This untiring worker wanted to finish her work here after she had made herself successful in her profession and her ambition was realized. Miss Becker was a self made woman and her personality played a big role in the success of her life. Her smile and sunny disposition will never be forgotten. Her ability to get people to do things they had resolved not to do was marvelous. She was tactful and could manage people well, for she knew how to read personalities. It can readily be said of her that she was one of Decatur's "doers."

Mary A. Burgess (class of 1925, Germantown Hospital, Germantown, Pa.), on November 17, of acute nephritis. Miss Burgess had completed two years and seven months of her training. "She has left a place in the school that cannot easily be filled, for so splendid a character is seldom found."

Mrs. Wennerberg (**Marie Franta** class of 1921, St. Joseph's Hospital, St. Paul, Minn.), on Oct. 21, of chronic nephritis. Burial was at Montgomery, Minn.

Antoinette Frecker (class of 1917, Mt. Carmel Hospital, Columbus, O.), on November 15, at the hospital from which she was graduated. Miss Frecker completed a course in Public Health Nursing at Ohio State University, in 1923, and then took up Child Welfare work in Shelby, O. She was an unusually well loved and successful nurse and her death, which followed a brief illness, is not only a loss to her many friends, but to the profession as well.

Julia Hoyne (class of 1905, Providence Hospital, Washington, D. C.), following an illness of six weeks, at Riverside Hospital, Knoxville, Tenn. Miss Hoyne was much beloved by her patients and by the members of her profession. She served ten months in France during the World War. Burial was at Washington, D. C.

Mrs. Ella Kalbfleisch (Milwaukee Hospital, Milwaukee) at St. Mary's Hospital, Madison, November 19.

Mary Lyons (class of 1921, Manhattan State Hospital, New York City), on December 15, after a long illness patiently borne. With the death of Miss Lyons the world loses a

conscientious and efficient nurse. An inscription might be placed upon a tablet above her—"The Loss Is Ours; the Gain Yours."

Mrs. Ruby Waid Papsdorf (class of 1922, Lakeside Hospital, Chicago), following an operation, a laminectomy of the fifth cervical vertebra. Mrs. Papsdorf received an injury in an automobile accident from which she never recovered. She was loved by all who knew her and will be greatly missed.

Mrs. Marie C. Reiswig (class of 1914, Welsh Hospital, Hutchinson, Kansas), of tuberculosis, on November 15, at the Asbury Hospital, Salina, Kansas, after several months' illness. Mrs. Reiswig was active in her profession until her death. As an instructor and supervisor she was very capable. She was faithful and conscientious, with a gentle personality and high ideals.

Nora J. Scott, on August 21, at the West Side Hospital, Chicago, Ill., of ruptured appendix.

Cornelia E. Seelye (class of 1878, New England Hospital for Women and Children, Boston, Mass.), on November 24, 1924. Miss Seelye had held executive positions in the Boston City Hospital, Boston; the Buffalo General Hospital, Buffalo, N. Y.; and the Newport Hospital, Newport, R. I. She had also been in business in Kansas City, Mo. For the past

fifteen years she had been House Mother at the Kansas City Young Men's Christian Association, where she exerted a lasting influence over the thousands of young men passing through that institution. Miss Seelye was an organizer and charter member of the district and state Nurses' Associations of Missouri and of the Superintendents' Society of Kansas City. She was chairman of the Red Cross Nursing Service Committee for the period before and during the World War. Her latest professional activity was to assist in gathering material for a history of nursing in Missouri.

Alice B. Warner (class of 1897, Englewood Hospital, Chicago), on May 23, at her home, from acute dilation of the heart. Miss Warner was a graduate of the first class in the hospital. Her whole life was one of unselfish service and high ideals. She was held in high esteem by all who knew her and both the medical staff and nurses of the hospital sincerely mourn her loss.

Laura E. Ziegler (class of 1892, Hahnemann Hospital, Philadelphia) on November 29, after a short illness. Miss Ziegler was active until the end, having been stricken while on duty. She was a faithful, active worker; she was present at the last alumnae meeting before her death. The members of the Association pay deep tribute to one of its oldest and most interested workers.

My soul, there is a country
Far beyond the stars,
Where stands a winged sentry
All skillful in the wars:

There above noise and danger,
Sweet Peace sits crowned with smiles,
And One born in a manger
Commands the beauteous files.

—Vaughan

BOOK REVIEWS

APPLIED CHEMISTRY FOR NURSES. By Joseph L. Rosenholtz, Ph.D. Edited by Alice Shepard Gilman, R.N. 220 pages. Illustrated. W. B. Saunders Company, Philadelphia. Price, \$2.00.

As is stated in the preface, this book is designed for use in a brief course. It is divided into two parts, the first dealing with the theories of chemistry and the second applying these in laboratory practice. The chapters closely follow the outline recommended in the Standard Curriculum of the National League of Nursing Education and are as follows: Introduction, Some Fundamental Concepts, Oxygen, Hydrogen—Hydrogen Peroxide—Water, Acids—Bases—Salts, Nitrogen—Air, Other Elements, Carbon, Organic Chemistry, Carbohydrates, Proteins, Fats, Foods—Their Course Through the Body, Vitamins, Questions, Bibliography.

At the end of each chapter there are helpful questions designed to stress the essential facts. There are also references to the corresponding laboratory experiments which are particularly well selected. Applications of the theoretical facts are made in special sections devoted to the physiology of the topic in question. In dealing with biological facts occasional expressions are such that to the student they would at least be confusing if not creative of erroneous impressions. As an example of this the following might be quoted, "When the oxy-haemoglobin has given up its supply of oxygen, it becomes haemoglobin. In this condition, it can form a temporary union with the carbon dioxide, the resulting product being called carbon

dioxide-haemoglobin or reduced haemoglobin."

The greater part of the book is devoted to inorganic chemistry. To the reviewer it seems unfortunate that space should be allotted to the study of the preparation and properties of hydrogen and nitrogen and to even a brief consideration of elements which play so small a part in the chemistry of living matter as do arsenic, antimony, boron, silicon, and others. A study of the composition of blood and urine and of metabolism would appear to be of greater practical value.

IRENE KOECHIG,
St. Louis, Mo.

THE FOUNDATION OF HEALTH. By William Barnard Sharp, M.D. Illustrated. 256 pages. Lea & Febiger, Philadelphia. Price \$2.50.

The author tells us in his preface, that the book is designed for use in early college years. In other words, its purpose is to lay the foundation of a more correct knowledge of the laws of health which will encourage vital interest in health preservation.

Anyone who has heard some of the fantastic ideas which some pupils bring with them when they come to our schools of nursing, or who has seen the lack of application of hygiene, will agree that such a text may well be used. One of the strong points about this book, is that it is medically up to date, simple, and brief enough so that the young person for whom it is intended will not lose connection with the starting point through a maze of explanation.

The book contains fourteen chapters,

the first of which, "The Problems of Health and Disease," shows the relation of hygiene to health, and takes up some of the general ways by which our resistance is overcome by disease. Emphasis is placed on the ability of a healthy body to care for itself if given a chance. It says: "The usual error of the unskilled consists in doing too much and particularly in upsetting physiologic processes with medicine." In the following ten chapters, different parts of the body which may be avenues for trouble, are discussed. First, a simple explanation of the structure and function is given,—then some of their disorders with measures for their relief. Always prevention is stressed and the desirability of so caring for oneself that the trouble will not be likely to occur. Skin, mucous membrane, digestive tract, respiration and body heat, reproduction, sensory and motor control of the body and the mental processes are some of the subjects. A chapter on Infection and Immunity in which an endeavor is made to instill the right idea about vaccination, and one on the benefits of physical exercise, are included in this part. The last three chapters are more general as their subjects would indicate:—The Hazards of Childhood, Health in the Home, and The Modern Health Movement. These chapters are especially good for those who are going to be makers of homes, who do not require the knowledge necessary for a physician or nurse, who yet need to practice fundamentals.

The last chapter, The Modern Health Movement, makes authoritative statements about several matters which are commonly misunderstood by the unscientific mind. Examples are: Experi-

ments with animals, autopsies, patent medicines and unusual systems for treatment of disease.

Following each chapter is a list of reference readings taken from the more detailed standard textbooks on hygiene, chapters being given, so no difficulty can be experienced by the pupil whose interest has been aroused by the shorter text.

To the reviewer, the great value of this book appears to be the groundwork of correct ways of thinking of the body and its functions. In the hands of a good teacher its value will be much enhanced because it furnishes a variety of topics for discussion and further study, but uses some terms which require explanation if the full meaning is to be derived from the condensed form. It may be called a stimulating text book.

SUSIE A. WATSON, R.N.,
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MATERIA MEDICA FOR NURSES. By A. L. Muirhead, M.D., and Edith P. Brodie, A.M. 190 pages. Second edition. C. V. Mosby Company, St. Louis. Price, \$2.25.

The attractive appearance, clear type, and convenient size of the second edition of Muirhead's *Materia Medica for Nurses* are external features which commend it as a text book to Schools of Nursing.

The first five chapters deal with systems of weights and measures, preparation of solutions and doses, giving a few simple, workable rules and problems which the teacher of the subject will find helpful but necessary to supplement from other sources. The remainder of the text is devoted to drugs classified according to their effects on various

systems, the discussions in some instances being prefaced by a brief review of the physiology of the system affected.

The uniform organization of the material, according to the physiology of the system chiefly concerned, sources, preparations and dosage of the drugs, their action, uses, and toxicology, make it a text well arranged for class reference and teaching purposes. The style is clear, definite, and concise. The aim, as stated in the preface, is held to throughout, "to provide the student with an adequate working knowledge of the subject in the simplest and briefest form; and at the same time, to meet as satisfactorily as possible, the recommendations for instruction in *Materia Medica* outlined in the *Standard Curriculum for Schools of Nursing*"; and therein lies the weakest feature of the book, the elementary treatment of the material.

Our criterion must be the extent to which it meets, or fails to meet, the present day needs of the nurse. Those schools that find it possible to give only twenty hours to the subject of *Materia Medica* would find in this a suitable text. The danger lies in absolute dependence upon the brief course, and as a result a class of students with a limited knowledge of this important subject. If the student is not given an adequate basis as a stimulus for acquiring additional information, the possibility is that she will be handicapped as a graduate, to which lack of time and interest for future study will contribute. In any event the progressive instructor will find additional reference material indispensable as supplementary to the text.

EDNA NEWMAN, R.N.,
Cleveland, Ohio

TRAINING FOR THE PROFESSIONS AND ALLIED OCCUPATIONS. By the Bureau of Vocational Information, New York. 742 pages. Price, \$3.50. Reprint of section on Training for Nursing. Price, 25 cents.

The rapid expansion in women's work and in their opportunities for professional and technical training has created a demand for up-to-date, authoritative information concerning training facilities available to women in the United States. To present definite information regarding such facilities is the purpose adequately accomplished by the Bureau of Vocational Information in this comprehensive report. It will prove especially valuable to educational administrators, deans of women, advisers of girls, and vocational counselors.

Not only have the members of the Bureau of Vocational Information served their task faithfully but, to quote from the preface, all of the twenty-three sections "have been read and criticized by leaders, both men and women, some hundred and ten in all, representing their various professions." Professional organizations have also coöperated in making this publication as nearly perfect as possible.

The report includes a general survey of the fields of work for which preparation is offered and a selected list of training facilities. The types of training which are coming to be accepted as the best, are indicated for each field. The need of standardization of the courses offered in various institutions for professional training is emphasized. To quote: "In several professional fields, notably in nursing, in the ministry, and in home economics, the need

of a thoroughgoing national, coöperative program for educational standardization is pressing, and these professions themselves will suffer for lack of a sufficient supply of acceptable recruits until such standardization has been made effective."

The section in the volume devoted to nursing has been prepared with care in explanation of the scope of the field, numerical importance, the position of women, kinds of training available, current developments and the future outlook. Especially is the scope well described, for the numerous forms of service which a nurse may render are made appealingly clear. That the importance of the vocation is not overstressed is clear, if one reads that the number of women nurses has increased from over 76,000 in 1910, to over 143,000 in 1920, and that in spite of the rapid increase which these figures indicate, the demand far exceeds the available supply. The demand for college women with additional special preparation for the positions of directors and instructors in schools of nursing is emphasized. Other positions in the hospital in which there is a demand for nurses with executive, scientific or technical preparation are enumerated. Above all is set forth the need of nurses prepared to do public health nursing in schools, industrial establishments, with child welfare organizations, and other civic and social agencies.

Simplicity of style, clear understanding, wide knowledge of the subject, and sincerity of treatment make the section on nursing, like other divisions, appeal with directness to any one interested or even to the chance reader. Sections on medicine, home economics, social work,

and public health, all scientifically related to this section, are prepared with equal care. Journalism, pharmacy, farming, business, are each presented with the same general plan. While some sections are carried to greater length, nursing as a vocation has been presented with dignity and adequacy.

A directory to universities, technical and professional schools in which training is offered accompanies each section. Except in a few fields, only those institutions have been included which require for admission a full high school education or the equivalent. As stated in the foreword, this basis of selection was determined upon, because, "in general the best schools hold consistently to the higher educational requirement for admission, and from constant study of women's work in many professions and occupations it is obvious that women cannot afford to handicap themselves with inferior preparation."

EVELYN WOOD, R.N.,
Chicago, Ill.

THE LAND OF SADDLE-BAGS. By James Watt Raine. 260 pages. Illustrated. Published jointly by Council of Women for Home Missions, 156 Fifth Avenue, New York, and Missionary Education Movement, 150 Fifth Avenue, New York. Price, \$1.50.

A penetrating, appreciative and sympathetic study of the mountain people of Appalachia, by the Professor of English at Berea College. It should contribute much to the understanding of these splendid Americans and their need of vastly increased educational facilities adapted to their environment.

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